OMB No 1545 0047

Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Department of the Treasury Internal Revenue Service

SCALLED DEC 0 3 201%

► Do not enter Social Security numbers on this form as it may be made public Information about Form 990 and its instructions is at <a href="https://www.irs.gov/form990">www.irs.gov/form990</a>.

Open to Public Inspection

<u>A</u>	For the 2	2013 calend	lar year, or tax year beginning , 2013, and ending		,
В	Check if ap	plicable	C	D Employer Ident	ification Number
	Addres	ss change	American Gas Association	13-0431	590
	Name	change	400 North Capitol Street, NW #450	E Telephone num	
	Initial	· ·	Washington, DC 20001	202-824	_7255
	$\vdash$			202-624	-1233
	Termir	1			<b>A</b>
	H	ded return		G Gross receipts	
	Applic	ation pending		s a group return for sub	☐ 163 <u>□ 1</u> 110
			Same As C Above	ill subordinates include ,' attach a list (see ins	d? Yes No
I	Tax-exer	npt status	501(c)(3) X 501(c) (6 ) (insert no) 4947(a)(1) or 527	,	···,
J	Websit	te: ► ww	W.aga.org H(c) Group	exemption number	•
ĸ	Form of o	organization	X Corporation   Trust   Association   Other ►   L Year of formation 197	71 M State of I	egal domicile DE
Pa	rt I	Summar			
-		efly describ	e the organization's mission or most significant activities See Schedule	<u> </u>	
	,	,	DEC Deliedate	<sup>⊻</sup> <b></b>	
ည္ဆ					
Governance					
Ver	2 Ch	eck this bo	x If the organization discontinued its operations or disposed of more than	25% of its not as	
Ĝ	_		ting members of the governing body (Part VI, line 1a)	25% OF its fiet as	
∘ಕ			lependent voting members of the governing body (Part VI, line 1b)	<del>  4</del>	45 35
Activities &			of individuals employed in calendar year 2013 (Part V, line 2a)	5	<u></u>
ž			of volunteers (estimate if necessary)	6	5,013
ই			d business revenue from Part VIII, column (C), line 12	7a	853,389.
_			business taxable income from Form 990-T, line 34	7 b	352,296.
-				Prior Year	Current Year
	<b>8</b> Co	ntributions	and grants (Part VIII, line 1h)	1 1101 1041	- Carrent Tear
Revenue				7,909,469.	55,985,017.
<b>9</b>		-	come (Part VIII, column (A), lines 3, 4, and 7d)	719,052.	974,039.
æ				1,249,975.	1,479,257.
_					
			milar amounts paid (Part IX, column (A), lines 1-3)	9,878,496.	58,438,313.
					980,000.
		· ·	to or for members (Part IX, column (A), line 4)		
ø				6,593,779.	17,576,227.
Expenses			undraising fees (Part IX, column (A), line 11e)		
8	<b>b</b> To	tal fundrais	ng expenses (PartilX, column (D) Line 25)		
ũ				2,415,520.	29,683,851.
	18 To	tal evnence			
			expenses Subtract line 18 from line 12 (0)	9,009,299.	48,240,078.
8 8		venue less		869,197.	10,198,235.
\$ E	20 To	tal accata (	( ) ( ) ( ) ( ) ( ) ( )	ing of Current Year	End of Year
88	20 To	tat assets (		0,658,072.	42,680,227.
N S				2,841,785.	22,101,946.
لتے	<del></del>			2,183,713.	<u>20,578,</u> 281.
Pa	rt II 📋	<u>Signatur</u>	e Block		
Unde	r penalties	of perjury, I de	clare that I have examined this return, including accompanying schedules and statements, and to the best of er (other than officer) is based op all information of which preparer has any knowledge	my knowledge and beli	ef, it is true, correct, and
comp	nete Deciar	ration of prepar	er (other than officer) is based or all information of which preparer has any knowledge		
			- Po (- Standars)	11/5	12014
Sig	ın	Sighatur	e of officer	ate /	
He	re	Kevi	n M. Hardardt Chie	f Fin'l/Adr	n Off.
			orint name and title		<del></del>
		Print/Type pa	eparer's name Preparer's signature Date	Check If	PTIN
Pai	d		Self-Prepared	self-employed	<del>درستس</del> ر
	eparer	Firm's name	>	1 22 0	
	e Only	Firm's addre		Fumic EIN D	
	,	i um s addre		Firm's EIN	
A 4 =		diameter 4	and the second of the second o	Phone no	1 1 1 1 1 1
_			s return with the preparer shown above? (see instructions)		Yes X No
BAA	A For Pa	perwork R	eduction Act Notice, see the separate instructions. TEEA0113L 1	1/08/13	Form <b>990</b> (2013)

	n <b>990</b> (2013) American Gas Association	13-0	43159	0	Pa	age <b>2</b>
Pai	rt III Statement of Program Service Accomplishments					
	Check if Schedule O contains a response or note to any line in this Part III					X
1	Briefly describe the organization's mission					
	See Schedule O					
	Did the organization undertake any significant program services during the year which were not listed on the price	or				
_	Form 990 or 990-EZ? See Schedule O		X	Yes		No
	If 'Yes,' describe these new services on Schedule O				ш	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program se	rvices?	П	Yes	X	No
	If 'Yes,' describe these changes on Schedule O		_		_	
4	Describe the organization's program service accomplishments for each of its three largest program service Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of others, the total expenses, and revenue, if any, for each program service reported	ices, as i grants ar	measure nd alloca	ed by e tions to	xpens	ses
4 a	a (Code ) (Expenses \$ including grants of \$ ) (R	Revenue	\$			)
	See Schedule O					
41	(Code) (Expenses \$including grants of \$) (R	Revenue	\$			)
7.	See Schedule O		<b>'</b> —			—′
	pec penedure o					
			. – – – -			
			. <del></del> .			
			. <b></b>			
						<b>_</b>
40	c (Code) (Expenses \$ including grants of \$) (R	evenue	۶			)
	See Schedule O		·			
4 0	d Other program services (Describe in Schedule O)  See Schedule O					
	(Expenses \$ including grants of \$ ) (Revenue \$				)	
	e Total program service expenses ►			Ear-	000 4	2012
BAA	TEEA0102L 07/02/13			Form	22U (	ZU13)

## Form 990 (2013) American Gas Association Partie Checklist of Required Schedules

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If 'Yes,' complete Schedule A	1		Х
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		Х
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If 'Yes,' complete Schedule C, Part I	3	х	
4	<b>Section 501(c)(3) organizations.</b> Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? <i>If 'Yes,' complete Schedule C, Part II</i>	4		
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If 'Yes,' complete Schedule C, Part III	5	х	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If 'Yes,' complete Schedule D, Part I	6		х
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If 'Yes,' complete Schedule D, Part II	7		Х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If 'Yes,' complete Schedule D, Part III	8		Х
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If 'Yes,' complete Schedule D, Part IV	9	···	х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If 'Yes,' complete Schedule D, Part V	10		Х
11	If the organization's answer to any of the following questions is 'Yes', then complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable		,	
;	a Did the organization report an amount for land, buildings and equipment in Part X, line 10? If 'Yes,' complete Schedule D, Part VI	11 a	Х	
١	<b>b</b> Did the organization report an amount for investments — other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16° If 'Yes,' complete Schedule D, Part VII	11 b		Х
•	c Did the organization report an amount for investments — program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part VIII	11 c		х
	d Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If 'Yes,' complete Schedule D, Part IX	11 d		Х
	e Did the organization report an amount for other liabilities in Part X, line 25? If 'Yes,' complete Schedule D, Part X	11 e	Х	
	f Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If 'Yes,' complete Schedule D, Part X	11 f	Х	
	a Did the organization obtain separate, independent audited financial statements for the tax year? If 'Yes,' complete Schedule D, Parts XI, and XII	12a		Х
	b Was the organization included in consolidated, independent audited financial statements for the tax year? If 'Yes,' and if the organization answered 'No' to line 12a, then completing Schedule D, Parts XI and XII is optional	12 b	Х	
	Is the organization a school described in section 170(b)(1)(A)(ii)? If 'Yes,' complete Schedule E	13		X
	a Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
,	b Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If 'Yes,' complete Schedule F, Parts I and IV	14b	Х	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If 'Yes,' complete Schedule F, Parts II and IV	15		X
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If 'Yes,' complete Schedule F, Parts III and IV	16		Х
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If 'Yes,' complete Schedule G, Part I (see instructions)	17		Х
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If 'Yes,' complete Schedule G, Part II	18		<u> </u>
	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If 'Yes,' complete Schedule G, Part III	19		<u>X</u> _
	a Did the organization operate one or more hospital facilities? If 'Yes,' complete Schedule H	20		X
	b If 'Yes' to line 20a, did the organization attach a copy of its audited financial statements to this return?	20 b		

Form 990 (2013) American Gas Association

Part V Checklist of Required Schedules (continued)

<u>.                                    </u>			Yes	No
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organizations or government on Part IX, column (A), line 17 If 'Yes,' complete Schedule I, Parts I and II	21	х	
22	Did the organization report more than \$5,000 of grants or other assistance to individuals in the United States on Part IX, column (A), line 2° If 'Yes,' complete Schedule I, Parts I and III	22		Х
23	Did the organization answer 'Yes' to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If 'Yes,' complete Schedule J	23	х	
24 a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If 'Yes,' answer lines 24b through 24d and complete Schedule K If 'No,'go to line 25a	24a		Х
t	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
(	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		
C	Did the organization act as an 'on behalf of' issuer for bonds outstanding at any time during the year?	24d		
25 a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If 'Yes,' complete Schedule L, Part I	25a		
ł	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If 'Yes,' complete Schedule L, Part I	25b		
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If so, complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If 'Yes,' complete Schedule L, Part III	27		Х
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
ā	A current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28a		Х
ł	A family member of a current or former officer, director, trustee, or key employee? If 'Yes,' complete Schedule L, Part IV	28b		Х
(	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If 'Yes,' complete Schedule L, Part IV	28c		Х
29	Did the organization receive more than \$25,000 in non-cash contributions? If 'Yes,' complete Schedule M	29		Х
	contributions? If 'Yes,' complete Schedule M	30		Х
31	Did the organization liquidate, terminate, or dissolve and cease operations? If 'Yes,' complete Schedule N, Part I	31		X
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If 'Yes,' complete Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301 7701-2 and 301.7701-3? If 'Yes,' complete Schedule R, Part I	33		Х
34	Was the organization related to any tax-exempt or taxable entity? If 'Yes,' complete Schedule R, Parts II, III, IV, and V, line 1	34	х	
35 a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
t	olf 'Yes' to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If 'Yes,' complete Schedule R, Part V, line 2	35b	Х	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? If 'Yes,' complete Schedule R, Part V, line 2	36		
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If 'Yes,' complete Schedule R, Part VI	37_		_x
	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 197  Note. All Form 990 filers are required to complete Schedule O	38	х	
BAA		Form	990 (	2013)

<u> </u>	Check if Schedule O contains a response or note to any line in this Part V						
	onothin contour c contains a response of field to any mile in this fact t	<del></del>		Yes	No		
1	a Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	1 a 43			-		
	<b>b</b> Enter the number of Forms W-2G included in line 1a Enter -0- if not applicable	1b 0					
	c Did the organization comply with backup withholding rules for reportable payments to vendors and r				,		
	(gambling) winnings to prize winners?	cportable gaining	1 c	X			
2	a Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax State- ments, filed for the calendar year ending with or within the year covered by this return	2a 97					
	<b>b</b> If at least one is reported on line 2a, did the organization file all required federal employmen		2 b	X	Ì		
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see in:				_		
3	a Did the organization have unrelated business gross income of \$1,000 or more during the year	· ·	3 a	Х	-		
	b If 'Yes' has it filed a Form 990-T for this year? If 'No' to line 3b, provide an explanation in Schedule O		3 b	X			
4 a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?							
	b If 'Yes,' enter the name of the foreign country				·		
_	See instructions for filing requirements for Form TD F 90-22 1, Report of Foreign Bank and F			<del>-</del>			
	a Was the organization a party to a prohibited tax shelter transaction at any time during the ta	•	5 a		X		
	b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelt	er transaction?	5 b		X		
	c If 'Yes,' to line 5a or 5b, did the organization file Form 8886-T?		5 c	_	L		
6	a Does the organization have annual gross receipts that are normally greater than \$100,000, a solicit any contributions that were not tax deductible as charitable contributions?	nd did the organization	6 a	Х			
	b If 'Yes,' did the organization include with every solicitation an express statement that such contribut not tax deductible?	ons or gifts were	6 b	х			
7	Organizations that may receive deductible contributions under section 170(c).						
	a Did the organization receive a payment in excess of \$75 made partly as a contribution and p	artly for goods and					
	services provided to the payor?		7 a				
	b If 'Yes,' did the organization notify the donor of the value of the goods or services provided?		7 b				
	c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it v Form 8282?	vas required to file	7 c				
	d If 'Yes,' indicate the number of Forms 8282 filed during the year	7 d			<u> </u>		
	e Did the organization receive any funds, directly or indirectly, to pay premiums on a personal	benefit contract?	7 e				
	f Did the organization, during the year, pay premiums, directly or indirectly, on a personal ben	efit contract?	7 f				
	g If the organization received a contribution of qualified intellectual property, did the organization file F	orm 8899			_		
	as required?		7 g		<u> </u>		
	h If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the Form 1098-C?	organization file a	7 h				
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting supporting organization, or a donor advised fund maintained by a sponsoring organization, holdings at any time during the year?	ng organizations. Did the ave excess business	8		ل د۔ ۔۔ ا		
9	Sponsoring organizations maintaining donor advised funds.						
	a Did the organization make any taxable distributions under section 4966?		9 a				
	b Did the organization make a distribution to a donor, donor advisor, or related person?		9 b				
	Section 501(c)(7) organizations. Enter	,	_[				
	a Initiation fees and capital contributions included on Part VIII, line 12	10 a			i		
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	10 Ы	1				
	Section 501(c)(12) organizations. Enter						
	a Gross income from members or shareholders	11 a					
	b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them ).	11 ь	-		ĺ		
12	a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu o	f Form 1041?	12 a				
	b If 'Yes,' enter the amount of tax-exempt interest received or accrued during the year	12b					
	Section 501(c)(29) qualified nonprofit health insurance issuers.			_	_!		
	a Is the organization licensed to issue qualified health plans in more than one state?		13 a		<u> </u>		
	Note. See the instructions for additional information the organization must report on Schedul	e O			Ī		
	b Enter the amount of reserves the organization is required to maintain by the states in which the organization is licensed to issue qualified health plans	13Ы	ļ				
	c Enter the amount of reserves on hand	13c	l	ļ			
	a Did the organization receive any payments for indoor tanning services during the tax year?		14a		X		
	b If 'Yes,' has it filed a Form 720 to report these payments? If 'No,' provide an explanation in S	Schedule Q	14b		<del> </del>		
3A/	<del></del>			990 (	(2013)		
	<del>-</del>			1			

1 011	15 0451570			age •				
Pai	Tt VI Governance, Management and Disclosure For each 'Yes' response to lines 2 through 7b be a 'No' response to line 8a, 8b, or 10b below, describe the circumstances, processes, or char Schedule O. See instructions.  Check if Schedule O contains a response or note to any line in this Part VI	low, a ges i	and f n	for X				
500	tion A. Governing Body and Management			11				
Sec	ation A. doverning body and management		Yes	No				
1 6	a Enter the number of voting members of the governing body at the end of the tax year  If there are material differences in voting rights among members See Sch. O  of the governing body, or if the governing body delegated broad  authority to an executive committee or similar committee, explain in Schedule O		103	140				
1	Enter the number of voting members included in line 1a, above, who are independent 1b 35	ļ						
	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee or key employee?	2		Х				
3	3 Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?  3							
4	Did the organization make any significant changes to its governing documents							
	since the prior Form 990 was filed?	4		Х				
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X				
6	Did the organization have members or stockholders? See Schedule Q	6	Х					
	a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body? See Schedule O	7 a	Х					
ı	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or other persons other than the governing body?	7 b	Х					
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			 				
	The governing body?	8 a	X					
i	Each committee with authority to act on behalf of the governing body?	8 b	Х					
9 Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If 'Yes,' provide the names and addresses in Schedule O								
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal R	evenu	ie Co	ode.)				
			Yes	No				
10 a	a Did the organization have local chapters, branches, or affiliates?	10 a		X				
ı	o If 'Yes,' did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10 b						
	a Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11 a	Х					
ı	Describe in Schedule O the process, if any, used by the organization to review this Form 990. See Schedule O							
	a Did the organization have a written conflict of interest policy? If 'No,' go to line 13	12 a	X					
	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12 b	Х					
•	c Did the organization regularly and consistently monitor and enforce compliance with the policy? If 'Yes,' describe in Schedule O how this was done See Schedule O	12 c	Х					
13	Did the organization have a written whistleblower policy?	13	X					
14	Did the organization have a written document retention and destruction policy?	14	X					
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?	_						
á	The organization's CEO, Executive Director, or top management official See Schedule O	15 a	_ X					
ı	Other officers of key employees of the organization See Schedule O  If 'Yes' to line 15a or 15b, describe the process in Schedule O (See instructions)	15 b	X					
16 a	a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16 a		Х				
ı	of 'Yes,' did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		· -				
Sec	tion C. Disclosure							
	List the states with which a copy of this Form 990 is required to be filed ► None							
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (501(c)(3)s only) a inspection. Indicate how you make these available. Check all that apply.	vaılabl	e for	public				
	Own website  Another's website  X Upon request  Other (explain in Schedule O)							
19	Describe in Schedule O whether (and if so, how) the organization makes its governing documents, conflict of interest policy, and financial statements avail the public during the tax year  See Schedule O	able to						
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization							

Form <b>990</b>	(2013)	American	Gas	Association

13-0431590

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## Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

#### Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1 a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter -0- in columns (D), (E), and (F) if no compensation was paid
  - List all of the organization's current key employees, if any See instructions for definition of 'key employee'
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees; officers, key employees, highest compensated employees, and former such persons

Chec	k this box if neither the organization no	or any rela	ted org	ganız	zatio	n co	mpen	sate	d any current officer, di	rector, or trustee	
	(A) Name and Title	(B) Average hours per	one bo	ox, un	less p	check perso	more t n is botl or/trusted	h an	(D)  Reportable compensation from	<b>(E)</b> Reportable compensation from	<b>(F)</b> Estimated amount of other
		week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) Ro	onald W. Jibson	_ 6								-	
Cł	nairman	0	Х		Х				0.	0.	0.
(2) G1	regg S Kantor	4									· ·
	st Vice Chair		Х		Х				0.	o .l	0.
	erry D. McCallister	2									
	nd Vice Chair	0-1	x		Х				0.	0.	0.
(4) La	awrence T. Borgard	2									
	ned Past Chair	0	X						0.	0.	0.
(5) Wi	illiam J. Akley	1			T						
Di	irector	0	X						0.	o .l	0.
	ennis V. Arriola	1			ヿ						
Di	irector	0	X						0.	0.	0.
(7) Ro	obert F. Beard	1									
Di	irector	0-	Х						0.	0.	0.
(8) Lo	onnie E. Bellar	1									-
Di	irector	-0-	X						0.	0.	0.
<b>(9)</b> Do	oyle N. Beneby	1									
Di	irector	0	X		ŀ	Ì			0.	0.	0.
(10) Ke	evin Burke	1				T					
Di	irector		X						0.	0.	0.
(11) Ca	arl L. Chapman	1									
Di	irector	-0-	X						0.	0.	0.
(12) Ki	lm R. Cocklin	1			Ī	Ī					
Di	irector	0	X			-			0.	0.	0.
(13) Ke	enneth W. DeFontes, Jr	1_1_		一	$\neg$	一					
	irector	0	x						0.	0.	0.
(14) La	awrence M. Downes	1		$\neg$		一					
	k-Officio	0	Х						0.	0.	0.

Part VII   Section A. Officers, Directors, Trus	tees, l	Key	En	1ple	oye	es,	and	d Highest Con	pensated Emp	loyees (continued)
	(B)			•	C)					
(A) Name and title	Average hours per week	box. offic	, unle cer a	ess po	erson dırect	than is both or/trus	h an tee)	(D)  Reportable compensation from	(E)  Reportable compensation from	(F) Estimated amount of other
	(list any hours for related organiza tions below dotted line)	Individual trustee or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	related organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(15) David R. Emery	1	Ţ,								2
Director	0	X		ļ			<u> </u>	0.	0.	0.
(16) William J. Fehrman Director	$-\frac{1}{0}$	X						0.	0.	0.
(17) Gordon L. Gillette	1							<u> </u>		<u> </u>
Director		Х						0.	0.	0.
(18) Edward J. Graham	_1_									
Director	0	Х						0.	0.	0.
(19) Kimberly Harris	$-\frac{1}{2}$	,								
Director	0	Х			<u> </u>			0.	0.	0.
(20) Glenn R. Jennings Director	$-\frac{1}{0}$	X						0.	0.	0.
(21) Christopher P. Johns Director	$-\frac{1}{0}$	х						0.	0.	0.
(22) Patricia L. Kampling Director	$-\frac{1}{0}$	х						0.	0.	0.
(23) Steven E. Kurmas Director	$-\frac{1}{0}$	Х						0.	0.	0.
(24) Ralph A. LaRossa Director	$-\frac{1}{0}$	X						0.	0.	0.
(25) Kent T. Larson	1	A			-		-	<u> </u>	0.	0.
Director		x						0.	0.	0.
1 b Sub-total	<del></del>	•—					<b></b>	0.	0.	0.
c Total from continuation sheets to Part VII, Section	Α						•	4,897,607.	0.	1,127,274.
d Total (add lines 1b and 1c)							<b></b>	4,897,607.	0.	1,127,274.
2 Total number of individuals (including but not limited to	those li	sted	abo	ve) v	who	recei	ved	more than \$100,00	0 of reportable comp	ensation

2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable compensation from the organization
41

			res	NO
3	Did the organization list any <b>former</b> officer, director, or trustee, key employee, or highest compensated employee on line 1a? If 'Yes,' complete Schedule J for such individual	3		Х
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If 'Yes' complete Schedule J for such individual	4	х	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If 'Yes,' complete Schedule J for such person	5		Х

#### Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
CWC Group Ltd. Regent House, London, SW11 3RB United Kingdom	LNG17 Conf. Svcs.	4,543,745.
ETF Ltd. 68-72 Lilyfield Road, Rozelle, NSW 2039 Australia	LNG17 Exhibit Svcs.	3,523,122.
Proof Integrated Communications P O Box 101880 Atlanta, GA 30392	AGA Magazine	532,176.
Barage Energy Consulting, LLC 9611 Club Valley Way Raleigh, NC 27617	Mtg. / Conf. Svcs.	482,228.
Canon Bus. Proc. Svcs, Inc. 12534 Collections Ctr Dr Chicago, IL 606	Mailroom/Prntg Svcs.	460,452.

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 of compensation from the organization ► 13

Form 990 (2013) American Gas Association
Part VIII Statement of Revenue

		Check if Schedule O	contains a resp	oonse or note to an	y line in this Part V	1111		ال
					(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512-514
ري دي	1 a	Federated campaigns	1a					-
35		Membership dues	1 b		1			
종질		Fundraising events.	10		1			
ي ≱ آخ		ŭ	<u> </u>					
농동		Related organizations	1d		ļ			
호 를	е	Government grants (contributi	ions) 1 e					
ᅙᇎ	f	All other contributions, gifts, g	grants, and					
ᇐ뙲	•	similar amounts not included	above 1 f					
	q	Noncash contributions included	d in lines 1a-1f \$					
중론	h	Total. Add lines 1a-1f	•	<b>•</b>				
PROGRAM SERVICE REVENUE CONTRIBUTIONS, GIFTS, GRANTS PROGRAM SERVICE REVENUE AND OTHER SIMILAR AMOUNTS				Business Code	<b>-</b>			
	2 a	Mootings / Eubibit	Tnaama	900004	26,081,361.	26,081,361.		
Ē	- 6	741-74-7-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1	псоше					
<u> </u>		<u>Membership Dues</u>		900004	23,034,262.	23,034,262.		
₹	C	Sponsorship Income		900004	5,364,125.	5,364,125.		
S	a	<u>Drive_NatGas_Ini</u>		900004	630,000.	630,000.		
₹	е	<u>Advertising Income</u>		541800	449,245.		449,245.	
<b>5</b>	f	All other program service	ce revenue	WKS	426,024.	21,880.	404,144.	
~	g	Total. Add lines 2a-2f		•	55,985,017.			
	3	Investment income (inc	luding dividend	ls, interest and				
		other similar amounts)		•	488,699.			488,699.
	4	Income from investmen	nt of tax-exemp	t bond proceeds 🕨				
	5	Royalties		•	1,066,073.			1,066,073.
			(ı) Real	(II) Personal				
	6 a	Gross rents.	32,592					
	b	Less rental expenses	38,700					1
	С	Rental income or (loss)	-6,108					
	_	Net rental income or (lo		·	-6,108.			-6,108.
		· 1	(i) Securities	(II) Other	0,100.		··· · · · · · · · · · · · · · · · · ·	-0,100.
	/ a	Gross amount from sales of assets other than inventory	1,597,535					
		•	1,391,333	3,620.				
	b	Less cost or other basis and sales expenses	1 000 040	24.766				
	_	Gain or (loss)	1,093,249					
	_	` ′	504,286	-18,946.				
	_	Net gain or (loss)			485,340.			485,340.
삙	8 a	Gross income from fund	draising events					•
		(not including \$						:
員		of contributions reported	a on line 1c)					1
OTHER REVEN		See Part IV, line 18		a				,
貭		Less direct expenses		b			= =	
٦	C	Net income or (loss) fro	om fundraising	events <u></u>				
	9 a	Gross income from gam See Part IV, line 19	ning activities					
		See Part IV, line 19	_	a				
	b	Less direct expenses		b				
	C	Net income or (loss) fro	om gaming acti	vities •	_			
	10 a	Gross sales of inventory	v less returns					
		and allowances	y, 1000 rotainio	а				,
	ь	Less cost of goods sold	d	ь				
	С	Net income or (loss) fro	om sales of inve	entory			•	·
		Miscellaneous Revenu		Business Code				
	11 a	Various Industry P	rojects	900004	237,955.	237, 955.		
		Supprt Svcs AmGas		900004	171,648.	171,648.	,	<del></del>
				900004	9,689.			<del></del>
		<u>Manufacturer Rebat</u> All other revenue	<u>es_                                    </u>	300004	7,089.	9,689.	•	
	_	Total. Add lines 11a-11	d	<u> </u>	410 000			<u> </u>
			-		419,292.	FF FF0 000	0.55 0.55	
	12	Total revenue. See inst	ructions		<u> 58,438,313.</u>	55,550,920.	853,389.	2,034,004.

## Form 990 (2013) American Gas Association Part IX | Statement of Functional Expenses

	TIX Statement of Functional Expens				<del>-</del>			
Seci	Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A)  Check if Schedule O contains a response or note to any line in this Part IX.							
	not include amounts reported on lines 7b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses			
	Grants and other assistance to governments and organizations in the United States See Part IV, line 21 Grants and other assistance to individuals in the United States See Part IV, line 22	980,000.						
3	Grants and other assistance to governments, organizations, and individuals outside the United States See Part IV, lines 15 and 16							
4 5	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees	4,585,197.						
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0.						
7	Other salaries and wages	8,855,402.			<u> </u>			
8	Pension plan accruals and contributions (include section 401(k) and 403(b) employer contributions).	2,600,377.						
9	Other employee benefits	871,993.			<u> </u>			
10	Payroll taxes	663,258.						
11	Fees for services (non-employees)							
а	Management							
	Legal	54,508.	<del></del>					
	: Accounting	60,774.						
	Lobbying	314,000.	· · · · · · · · · · · · · · · · · · ·		· · · · · · · · · · · · · · · · · · ·			
	Professional fundraising services See Part IV, line 17	314,000.	· · · · · · · · · · · · · · · · · · ·		<del></del>			
-	Investment management fees	20 712	<del> </del>					
_	Other. (If line 11g amt exceeds 10% of line 25, column	29,712.						
9	(A) amount, list line 11g expenses on Schedule (A)	3,121,119.						
12	Advertising and promotion	630,050.						
13	Office expenses	1,288,292.						
14	Information technology	592,259.						
15	Royalties	2,000.	<u>-</u>					
16	Occupancy	1,429,686.						
17	Travel	1,115,420.		-				
18	Payments of travel or entertainment expenses for any federal, state, or local public officials							
19	Conferences, conventions, and meetings	19,141,801.						
20	Interest							
	- · · · · · · · · · · · · · · · · · · ·							
	, , ,	501,701.						
	Insurance	344,615.						
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule O)							
а	Memberships & Contributions	804,640.						
b	Unrelated Business Income Tax	156,138.						
c	1120 POL Income Tax	32,282.						
d		22,666.						
е	All other expenses	42,188.						
25	Total functional expenses. Add lines 1 through 24e	48,240,078.						
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation Check here □ if following SOP 98-2 (ASC 958-720).							

Balance Sheet

Part X

Check if Schedule O contains a response or note to any line in this Part X **(B)** End of year (A) Beginning of year Cash - non-interest-bearing 1 2 2 Savings and temporary cash investments 11,709,995. 17,158,084 3 Pledges and grants receivable, net 3 Accounts receivable, net 4 2,099,735 406,273. Loans and other receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L. 5 Loans and other receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary employees beneficiary organizations (see instructions) Complete Part II of Schedule L 6 Notes and loans receivable, net 7 8 Inventories for sale or use Prepaid expenses and deferred charges 9 3,375,402 462,028. 10a Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D 10 a 7,831,124 10 b **b** Less accumulated depreciation 5,579,850 10 c 1,891,674 2,251,274. Investments - publicly traded securities. 11 11 26,133,177 27,850,657. Investments - other securities See Part IV, line 11 12 Investments - program-related See Part IV, line 11 13 13 14 Intangible assets 14 15 Other assets See Part IV, line 11 15 Total assets. Add lines 1 through 15 (must equal line 34) 16 16 50,658,072 42,680,227. Accounts payable and accrued expenses 17 17 2,923,144 4,457,059. 18 Grants payable 18 19 Deferred revenue 19 3,808,573 19,517,335 20 Tax-exempt bond liabilities 20 21 21 Escrow or custodial account liability Complete Part IV of Schedule D Loans and other payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L 22 Secured mortgages and notes payable to unrelated third parties 23 Unsecured notes and loans payable to unrelated third parties 24 Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D. 25 25 30,401,306 13,836,314. Total liabilities. Add lines 17 through 25 52,841,785 26 22,101,946. Organizations that follow SFAS 117 (ASC 958), check here > X and complete lines 27 through 29, and lines 33 and 34. Unrestricted net assets 27 27 -2,183,71320,578,281. Temporarily restricted net assets 28 29 Permanently restricted net assets P Organizations that do not follow SFAS 117 (ASC 958), check here > and complete lines 30 through 34. Capital stock or trust principal, or current funds 30 31 Paid-in or capital surplus, or land, building, or equipment fund 31 Retained earnings, endowment, accumulated income, or other funds 32 32 33 Total net assets or fund balances 33 -2,183,71320,578,281 34 Total liabilities and net assets/fund balances 34 50,658,072 42,680,227. BAA Form 990 (2013)

ron	11 990 (2013) American Gas Association	12-04212	90	га	ige 12
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response or note to any line in this Part XI				X
1	Total revenue (must equal Part VIII, column (A), line 12)	1	58,4	38,3	313.
2	Total expenses (must equal Part IX, column (A), line 25)	2	48,2	40,0	78.
3	Revenue less expenses Subtract line 2 from line 1	3	10,1	98,2	235.
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)).	4	-2,1	33,7	/13.
5	Net unrealized gains (losses) on investments	5	1,3	58,6	522.
6	Donated services and use of facilities	6	-		
7	Investment expenses	7			
8	Prior period adjustments	8			
9	Other changes in net assets or fund balances (explain in Schedule O) See Schedule O	9	11,2	05,1	.37.
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33, column (B))	10	20,5	78,2	281.
Pa	rt XII   Financial Statements and Reporting	•			
	Check if Schedule O contains a response or note to any line in this Part XII				
				Yes	No
1	Accounting method used to prepare the Form 990 Cash X Accrual Other		_ [ ]		
	If the organization changed its method of accounting from a prior year or checked 'Other,' explain in Schedule O				
2	a Were the organization's financial statements compiled or reviewed by an independent accountant?		2 a		X
	If 'Yes,' check a box below to indicate whether the financial statements for the year were compiled or re separate basis, consolidated basis, or both	viewed on a			
	Separate basis Consolidated basis Both consolidated and separate basis				
	b Were the organization's financial statements audited by an independent accountant?		2 b	Х	
	If 'Yes,' check a box below to indicate whether the financial statements for the year were audited on a s basis, consolidated basis, or both	eparate			
	Separate basis X Consolidated basis Both consolidated and separate basis				
	c If 'Yes' to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the review, or compilation of its financial statements and selection of an independent accountant?		2 c	Х	
	If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O				
3	a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Sir Audit Act and OMB Circular A-133?	ngle	3 a		Х
	b If 'Yes,' did the organization undergo the required audit or audits? If the organization did not undergo the require	d audit	31		
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits		3 b	200	(2012)
BA/	<b>4</b>		Form	33U (	(८।७)

#### SCHEDULE C (Form 990 or 990-EZ)

#### **Political Campaign and Lobbying Activities**

For Organizations Exempt From Income Tax Under section 501(c) and section 527

2013

Open to Public Inspection

Schedule C (Form 990 or 990-EZ) 2013

Department of the Treasury Internal Revenue Service ► Complete if the organization is described below. ► Attach to Form 990 or Form 990-EZ. ► See separate instructions. ► Information about Schedule C (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990.

If the organization answered 'Yes,' to Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered 'Yes,' to Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)) Complete Part II-B Do not complete Part II-A

If the organization answered 'Yes,' to Form 990, Part IV, line 5 (Proxy Tax) or Form 990-EZ, Part V, line 35c (Proxy Tax), then

•	Section	501(c)(4), (5), or (6) o	rganizations Complete Part III			
Name	of organ	ızatıon			Employer identific	ation number
Am	erica	n Gas Associat	ion_		13-043159	0
Pa	rt I-A	Complete if the o	rganization is exempt under section	on 501(c) or is a s	section 527 organi	zation.
1	Provi	de a description of the	organization's direct and indirect political o	ampaign activities in	Part IV See Part	IV
		cal expenditures				92,235.
3	Volun	teer hours				
Pa	rt I-B	Complete if the o	rganization is exempt under section	on 501(c)(3).		
1	Enter	the amount of any exc	ise tax incurred by the organization under	section 4955	<b>&gt;</b> \$	
2	Enter	the amount of any exc	cise tax incurred by organization managers	under section 4955	▶\$	
3	If the	organization incurred a	a section 4955 tax, did it file Form 4720 for	this year?		Yes No
4	<b>a</b> Was a	a correction made?				☐Yes ☐No
-	<b>b</b> If 'Ye	s,' describe in Part IV				
Pa	rt I-C	Complete if the o	rganization is exempt under section	on 501(c), excep	t section 501(c)(3).	
1			pended by the filing organization for section			
2	Enter functi	the amount of the filing o	organization's funds contributed to other organ	izations for section 527	<sup>7</sup> exempt ► \$	92,235.
3	Total line 1	exempt function expen 7b	ditures Add lines 1 and 2 Enter here and	on Form 1120-POL,	<b>►</b> \$	92,235.
4	Did th	e filing organization file	e Form 1120-POL for this year?			X Yes No
5	organ amour	ization made payments nt of political contribution	and employer identification number (EIN) s. For each organization listed, enter the ar is received that were promptly and directly delal action committee (PAC). If additional spa	mount paid from the f evered to a separate po	filing organization's fund hitical organization, such	which the filing ds Also enter the
		(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter-0-	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization If none, enter -0-
(I)	See P	art IV				
(2)	_					
(3)						
(4)						
(5)						
(6)						

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 201	<sup>13</sup> American Ga	as Association	,	13-043	31590 Page <b>2</b>
	the organizatio	n is exempt under se	ction 501(c)(3) ar	nd filed Form 5768 (e	election under
A Check ► ☐ if the filin	ng organization belon	gs to an affiliated group (and	I list in Part IV each aff	iliated group member's nan	ne,
address,	EIN, expenses, an	d share of excess lobbying	expenditures)		
B Check ► I If the filing	ng organization che	cked box A and 'limited co	ntrol' provisions appl	y	
(The term		ying Expenditures ans amounts paid or incur	red.)	(a) Filing organization's totals	(b) Affiliated group totals
1 a Total lobbying expendit	ures to influence pu	iblic opinion (grass roots lo	obbying).		-
<b>b</b> Total lobbying expendition	ures to influence a	legislative body (direct lob)	bying).		
c Total lobbying expenditi	ures (add lines 1a a	and 1b)			
d Other exempt purpose	expenditures				
e Total exempt purpose e	expenditures (add li	nes 1c and 1d)			
f Lobbying nontaxable an both columns.	nount Enter the an	nount from the following tal	ble ın		
If the amount on line 1e, col	umn (a) or (b) is	The lobbying nontaxable	amount is		
Not over \$500,000		20% of the amount on line 1e			
Over \$500,000 but not over \$1	,000,000	\$100,000 plus 15% of the excess	over \$500,000		
Over \$1,000,000 but not over \$	\$1,500,000	\$175,000 plus 10% of the excess	over \$1,000,000		
Over \$1,500,000 but not over \$	\$17,000,000	\$225,000 plus 5% of the excess of	over \$1,500,000		
Over \$17,000,000		\$1,000,000			
g Grassroots nontaxable a	amount (enter 25%	of line 1f).			
<b>h</b> Subtract line 1g from lir	ne 1a. If zero or les	s, enter -0-			
i Subtract line 1f from lin	e 1c If zero or less	s, enter -0-			
j If there is an amount othe section 4911 tax for this		line 1h or line 1i, did the org	ganization file Form 472	20 reporting	Yes No
(Som		4-Year Averaging Period lat made a section 501(h) elns below. See the instructi	lection do not have to		
	Lobb	ying Expenditures During	4-Year Averaging Pe	riod	
Calendar year (or fiscal year beginning in)	<b>(a)</b> 2010	<b>(b)</b> 2011	<b>(c)</b> 2012	( <b>d</b> ) 2013	(e) Total
2 a Lobbying non-taxable amount					
<b>b</b> Lobbying ceiling amount (150% of line 2a, column (e))					
c Total lobbying expenditures					

BAA

**d** Grassroots nontaxable amount

e Grassroots ceiling amount (150% of line 2d, column (e))

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2013

				under section	501(c)(3)	and has	NOT filed	Form 5768
(election	under se	ection 501(h	)).					

(election under section 501(h)).	(a	<u>,                                     </u>		<u></u>	
or each 'Yes' response to lines 1a through 1ı below, provide in Part IV a detailed description the lobbying activity	Yes	No	Amo		
	+				
During the year, did the filing organization attempt to influence foreign, national, state or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of	=				
a Volunteers?	<b>-</b>				
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?	-			-	
c Media advertisements?					
d Mailings to members, legislators, or the public?	<b>-</b>				
e Publications, or published or broadcast statements?	<b> </b>	_			
f Grants to other organizations for lobbying purposes?	-				
g Direct contact with legislators, their staffs, government officials, or a legislative body?					
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?		$\longrightarrow$			
i Other activities?	<b>_</b>	$\longrightarrow$			
j Total Add lines 1c through 1:	-				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?					
<b>b</b> If 'Yes,' enter the amount of any tax incurred under section 4912	1 !	<u> </u>			
c If 'Yes,' enter the amount of any tax incurred by organization managers under section 4912					
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?					
art III-A Complete if the organization is exempt under section 501(c)(4), section 50 section 501(c)(6).	l(c)(5)	, or 			
				Yes	No
Were substantially all (90% or more) dues received nondeductible by members?			1		<u>X</u>
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?			2		<u>X</u> _
Did the organization agree to carry over lobbying and political expenditures from the prior year?			3	Х	
art III-B Complete if the organization is exempt under section 501(c)(4), section 50 (6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered 'No' OR (b) answered 'Yes.'	l(c)(5) Part II	, or se I-A, li	ection 50 ne 3, is	11(c)	
Dues, assessments and similar amounts from members.		1	22,8	40,5	12.
Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of political expenses for which the section 527(f) tax was paid).					
a Current year		2 a		40,6	
<b>b</b> Carryover from last year	l	2 b		97,2	
c Total		2 c		43,3	
Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3	6	85,2	<u> 15.</u>
If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the excess does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and political expenditure next year?		4	<del>-</del> 5	41,9	03.
Taxable amount of lobbying and political expenditures (see instructions)	ľ	5			0.
art IV   Supplemental Information					
ovide the descriptions required for Part I-A, line 1; Part I-B, line 4, Part I-C, line 5, Part II-A (affiliated groant II-B, line 1 Also, complete this part for any additional information.  Part I-A, Line 1 - Direct and Indirect Political Campaign Activities	up list),	Part II	-A, line 2;	and	

AGA's political campaign activities consist of contributions made to candidates for state and local office where legally permissable, contributions to other political organizations, and administrative expenses for its separate segregated fund.

BAA

#### **SCHEDULE D** (Form 990)

Supplemental Financial Statements

Complete if the organization answered 'Yes,' to Form 990,
Part IV, lines 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

Attach to Form 990.

Information about Schedule D (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2013

Department of the Treasury Internal Revenue Service Name of the organization

Open to Public Inspection Employer identification number

Ame	erican Gas Association		13-0431590
Pai	TI Organizations Maintaining Done	or Advised Funds or Other Similar Fu	nds or Accounts.
	Complete if the organization ans	wered 'Yes' to Form 990, Part IV, line	6.
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate contributions to (during year)		
3	Aggregate grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and do are the organization's property, subject to the	nor advisors in writing that the assets held in d organization's exclusive legal control?	onor advised funds Yes No
6	Did the organization inform all grantees, dono for charitable purposes and not for the benefi impermissible private benefit?	ors, and donor advisors in writing that grant fun it of the donor or donor advisor, or for any othe	ds can be used only r purpose conferring Yes No
Pai		swered 'Yes' to Form 990, Part IV, line	7.
1	Purpose(s) of conservation easements held b	y the organization (check all that apply)	·
	Preservation of land for public use (e g ,	recreation or education) Preservation	of an historically important land area
	Protection of natural habitat	Preservation	of a certified historic structure
	Preservation of open space	_	
2		held a qualified conservation contribution in the for	m of a conservation easement on the
	last day of the tax year		Held at the End of the Tax Year
	a Total number of conservation easements		2 a
	<b>b</b> Total acreage restricted by conservation ease	ements	2 b
	Number of conservation easements on a cert		. 2c
		in (c) acquired after 8/17/06, and not on a histo	<del></del>
,	structure listed in the National Register	in (c) acquired after 8/17/06, and not on a histo	2 d
3	Number of conservation easements modified, tra tax year ►	nsferred, released, extinguished, or terminated by	he organization during the
4	Number of states where property subject to cons	ervation easement is located >	
5	Does the organization have a written policy reand enforcement of the conservation easeme	egarding the periodic monitoring, inspection, hants it holds?	ndling of violations,
6	Staff and volunteer hours devoted to monitoring,	inspecting, and enforcing conservation easements	during the year
7	Amount of expenses incurred in monitoring, inspi	ecting, and enforcing conservation easements durii	ng the year
8	Does each conservation easement reported or and section 170(h)(4)(B)(ii)?	n line 2(d) above satisfy the requirements of se	ection 170(h)(4)(B)(i) Yes No
9	In Part XIII, describe how the organization report include, if applicable, the text of the footnote conservation easements	s conservation easements in its revenue and exper to the organization's financial statements that i	nse statement, and balance sheet, and describes the organization's accounting for
Pai	t III Organizations Maintaining Colle	ections of Art, Historical Treasures, or wered 'Yes' to Form 990, Part IV, line	Other Similar Assets. 8.
1:	a If the organization elected, as permitted unde art, historical treasures, or other similar assets h in Part XIII, the text of the footnote to its fina	er SFAS 116 (ASC 958), not to report in its reverseld for public exhibition, education, or research in fincial statements that describes these items.	nue statement and balance sheet works of urtherance of public service, provide,
ı	b If the organization elected, as permitted under historical treasures, or other similar assets held if following amounts relating to these items	er SFAS 116 (ASC 958), to report in its revenue for public exhibition, education, or research in furth	statement and balance sheet works of art, erance of public service, provide the
	(i) Revenues included in Form 990, Part VIII	, line 1	<b>►</b> \$
	(ii) Assets included in Form 990, Part X		<b>►</b> \$
2	If the organization received or held works of art, amounts required to be reported under SFAS	historical treasures, or other similar assets for finar 116 (ASC 958) relating to these items:	ncial gain, provide the following
i	a Revenues included in Form 990, Part VIII, line	e 1	▶\$
ı	Assets included in Form 990, Part X		<b>▶</b> \$

Schedule D (Form 990) 2013 Amer			<u> </u>		13-043			Page 4		
Part III Organizations Mainta	aining Collect	ions of Art, Hist	orical Treasures, c	or Other S	imilar Ass	ets (c	ontinu	ued)		
3 Using the organization's acquisitio items (check all that apply)	n, accession, and	other records, check a	any of the following that a	are a signific	ant use of its	collectio	n			
a Public exhibition										
<b>⊢</b> ′										
c Preservation for future gene										
4 Provide a description of the organi Part XIII.			-		•					
5 During the year, did the organiz to be sold to raise funds rather	than to be mainta	ained as part of the i	organization's collection	n <sup>2</sup>		Yes		No		
Part IV Escrow and Custodia line 9, or reported an				nswered '	Yes' to For	m 990	), Par	t IV,		
1 a Is the organization an agent, tru on Form 990, Part X?	istee, custodian,	or other intermediar	y for contributions or o	ther assets	not included	Yes	 ; [	No		
<b>b</b> If 'Yes,' explain the arrangemen	it in Part XIII and	complete the follow	ing table			^		<u> </u>		
- Pasinning halanse						Amoun	<u>t</u>			
<ul> <li>c Beginning balance</li> <li>d Additions during the year</li> </ul>				1 c						
e Distributions during the year				1 d						
f Ending balance				1 e						
2 a Did the organization include an	amount on Form	990 Part X June 21	7			Yes		No		
<b>b</b> If 'Yes,' explain the arrangemen		•		ed in Part X	L		<u> </u>	∃"		
Part V Endowment Funds.						e 10.				
	(a) Current yea	ar (b) Prior yea	r (c) Two years bad	ck (d) T	hree years back	(e)	Four year	rs back		
1 a Beginning of year balance.						ļ				
<b>b</b> Contributions										
<ul> <li>c Net investment earnings, gains, and losses</li> </ul>										
d Grants or scholarships										
<ul> <li>Other expenditures for facilities and programs</li> </ul>										
f Administrative expenses										
<b>g</b> End of year balance	L									
2 Provide the estimated percentage			ne 1g, column (a)) held	d as						
a Board designated or quasi-endown		8								
<b>b</b> Permanent endowment ►	%	_								
c Temporarily restricted endowme		%								
The percentages in lines 2a, 2b	, and 2c should e	qual 100%								
3a Are there endowment funds not in organization by	the possession of	the organization that	are held and administere	d for the		ſ	Yes	No		
(i) unrelated organizations						3a(i)		1		
(ii) related organizations						3a(ii)		†		
<b>b</b> If 'Yes' to 3a(II), are the related	organizations lis	ted as required on S	chedule R?			3b		<del>                                     </del>		
4 Describe in Part XIII the intende	-	•				_ <del></del> _1				
Part VI Land, Buildings, and			<del></del>							
Complete if the organ		ered 'Yes' to Forr	n 990, Part IV, line	e 11a. Se	e Form 990	), Part	t X, Iır	ne 10.		
Description of property	(a)	Cost or other basis (investment)	(b) Cost or other basis (other)		umulated eciation	(d)	Book v	alue		
1 a Land .										
<b>b</b> Buildings.										
c Leasehold improvements.	c Leasehold improvements. 2,763,182. 1,623,762. 1,139,420									
<b>d</b> Equipment			3,276,168.		44,692.	_		,476.		
e Other .			1,791,774.		111,396.			,378.		
Total. Add lines 1a through 1e (Colur	nn (d) must equa	al Form 990, Part X,			<b>&gt;</b>	2		,274.		
BAA		<u> </u>			Schedu			0) 2013		

Schedule D (Form 990 2013 American Gas Association   13-0431590   Page   Page   Part VII.   Investments - Other Securities   N/A				
Complete if the organization answered 'Yes' to Form 990, Part IV, line 11b. See Form 990, Part X, line 12 (a) Description of search or artificial form 900, Part X, column (b) Investment It pe (b) Book value (c) Method of valuation: Cost or end-of-year market value (c) Method of valuation: Cost or end-of-y		ciation		431590 Page 3
(a) Bescription of security or category (including name of security) (b) Brain call derivatives (c) Glosely-held equity interests (d) (d) (d) (e) (e) (f) (f) (g) (g) (g) (g) (g) (g) (g) (g) (g) (g				000 D-4 V I 10
(1) Francial derivatives (2) Closely-held equity interests (3) Other (A) (A) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C				
(2) Closely-held equity interests (3) Other (A) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C		(b) Book value	(c) Method of valuation: Cost or en	d-of-year market value
(3) Other (A) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C	* *			
(A) (B) (B) (C) (C) (C) (C) (C) (C) (C) (C) (C) (C				
(a) (b) (c) (c) (c) (c) (c) (c) (c) (c) (c) (c	(3) Other			
(G) (G) (G) (G) (F) (D) (G) (G) (F) (D) (G) (F) (D) (D) (Total (Column (b) must equal form 990, Part X, column (B) fine 12) (A) (B) (C) (D) (D) (D) (D) (D) (D) (D) (D) (D) (D	(A)			
(C)	(B)			
(G)	(C)			
(G)	(D)			
(3) (4) (5) (6) (7) (8) (9) (10) (10) (10) (10) (10) (10) (10) (10				
(b) Total (Column (b) must equal Form 930, Part X, column (B) line 12)   Part VIII   Investments — Program Related. Complete if the organization answered "Yes" to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.  (a) Description of investment type (b) Book value (c) Method of valuation Cost or end-of-year market value (2) (3) (3) (4) (4) (5) (6) (6) (7) (7) (8) (9) (10) (10) (10) (10) (10) (10) (10) (10	(F)			
Total (Column (b) must equal Form 990, Part X, column (B) line 12)   Part VIII   Investments — Program Related.   Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.	(G)			
Total				
Total	(l)			
Investments — Program Related. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11c. See Form 990, Part X, line 13.   (a) Description of investment type   (b) Book value   (c) Method of valuation Cost or end-of-year market value   (1)		·		
(1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total (Column (b) must equal Form 990, Part X, column (B) line 13)  (a) Description  (b) Book value  (c) (3) (4) (5) (6) (7) (8) (9) (10) Total (Column (b) must equal Form 990, Part X, column (B) line 15) (6) (7) (8) (9) (10) Total (Column (b) must equal Form 990, Part X, column (B) line 15) (9) (10) (10) (10) (10) (11) (2) (3) (4) (4) (5) (5) (6) (7) (8) (9) (10) (10) Total (Column (b) must equal Form 990, Part X, column (B) line 15)  Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25 (a) Description of liability (b) Book value (1) Federal income taxes (2) Accrued Pension 7,852,214. (3) Appliance Stds/Certification Liab. 1,821,013. (4) Deferred Compensation Plan 1,237,820.	Part VIII Investments — Program Related. Complete if the organization answered	'Yes' to Form 990	, Part IV, line 11c. See Form	990, Part X, line 13.
(2) (3) (4) (5) (6) (7) (8) (9) (10) (10) (10) (10) (10) (10) (10) (10	(a) Description of investment type	(b) Book value	(c) Method of valuation Cost or er	nd-of-year market value
(3) (4) (5) (6) (7) (8) (9) (10) Total (Column (b) must equal Form 990, Part X, column (B) line 13) (1) (2) (3) (4) (4) (5) (6) (7) (8) (9) (10) (10) (10) (10) (2) (3) (4) (4) (5) (6) (7) (8) (9) (10) (7) (8) (9) (10) (10) (10) (10) (10) (10) (10) (10	(1)			
(4) (5) (6) (7) (8) (9) (10) Total (Column (b) must equal form 990, Part X, column (B) line 13)  (a) Description  (b) Book value  (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B). line 15)  Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (6) (7) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B). line 15)  Part X Other Liabilities. (a) Description 1 (b) Book value  (1) Federal income taxes (2) Accrued Pension 7,852,214. (3) Appliance Stds/Certification Liab. 1,821,013. (4) Deferred Compensation Plan 1,237,820.	(2)			
(4) (5) (6) (7) (8) (9) (10) Total (Column (b) must equal form 990, Part X, column (B) line 13)  (a) Description  (b) Book value  (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B). line 15)  Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (6) (7) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B). line 15)  Part X Other Liabilities. (a) Description 1 (b) Book value  (1) Federal income taxes (2) Accrued Pension 7,852,214. (3) Appliance Stds/Certification Liab. 1,821,013. (4) Deferred Compensation Plan 1,237,820.	(3)			
(5) (6) (7) (8) (9) (10) Total (Column (b) must equal Form 990, Part X, column (B) line 13) (A) Description (B) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B). line 15)  Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (6) (7) (8) (9) (10) Total. (Column (b) must equal Form 990, Part X, column (B). line 15)  Part X Other Liabilities. (a) Description 1 (b) Book value (1) Federal income taxes (2) Accrued Pension 7,852,214. (3) Appliance Stds/Certification Liab. 1,821,013. (4) Deferred Compensation Plan 1,237,820.				
(6) (7) (8) (9) (10) Total (Column (b) must equal Form 990, Part X, column (B) line 13) (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total (Column (b) must equal Form 990, Part X, column (B). line 15)  Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25 (a) Description of liability (b) Book value (1) Federal income taxes (2) Accrued Pension 7, 852, 214. (3) Appliance Stds/Certification Liab. 1, 821, 013. (4) Deferred Compensation Plan 1, 237, 820.				
(7) (8) (9) (10) Total (Column (b) must equal Form 990, Part X, column (B) line 13)  (a) Description  (b) Book value  (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (B), line 15)  Part X Other Liabilities.  Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25  (a) Description  (b) Book value  (1)  Total. (Column (b) must equal Form 990, Part X, column (B), line 15)  Part X Other Liabilities.  Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25  (a) Description of liability (b) Book value  (1) Federal income taxes (2) Accrued Pension (3) Appliance Stds/Certification Liab. (4) Deferred Compensation Plan (1, 237, 820.				
(8) (9) (10) Total (Column (b) must equal Form 990, Part X, column (B) line 13)  Part IX Other Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Book value  (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (B), line 15)  Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25  (a) Description of liability (b) Book value  (1) Federal income taxes (2) Accrued Pension 7, 852, 214. (3) Appliance Stds/Certification Liab. 1, 821, 013. (4) Deferred Compensation Plan 1, 237, 820.			<del></del>	<del></del>
(9) (10) Total (Column (b) must equal Form 990, Part X, column (B) line 13)  (a) Description  (b) Book value  (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (B). line 15)  Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25  (a) Description  (b) Book value  (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (B). line 15)  Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25  (a) Description of liability (b) Book value  (1) Federal income taxes (2) Accrued Pension 7, 852, 214. (3) Appliance Stds/Certification Liab. 1, 821, 013. (4) Deferred Compensation Plan 1, 237, 820.				
Total (Column (b) must equal Form 990, Part X, column (B) line 13)  Part IX Other Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Book value  (c) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (B). line 15)  Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25  (a) Description of liability (b) Book value  (1) Federal income taxes (2) Accrued Pension 7, 852, 214. (3) Appliance Stds/Certification Liab. 1, 821, 013. (4) Deferred Compensation Plan 1, 237, 820.			<del></del>	
Total (Column (b) must equal Form 990, Part X, column (B) line 13)  Part IX Other Assets.  Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description  (b) Book value  (c)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  (10)  Total. (Column (b) must equal Form 990, Part X, column (B). line 15)  Part X Other Liabilities.  Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25  (a) Description of liability (b) Book value  (1) Federal income taxes  (2) Accrued Pension 7, 852, 214.  (3) Appliance Stds/Certification Liab. 1, 821, 013.  (4) Deferred Compensation Plan 1, 237, 820.			<del></del>	
Part IX Other Assets. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11d. See Form 990, Part X, line 15.  (a) Description (b) Book value  (c) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (B). line 15)  Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25 (a) Description of liability (b) Book value  (1) Federal income taxes (2) Accrued Pension 7, 852, 214. (3) Appliance Stds/Certification Liab. 1, 821, 013. (4) Deferred Compensation Plan 1, 237, 820.				
(a) Description (b) Book value  (1) (2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (B), line 15)  Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25  (a) Description of liability (b) Book value  (1) Federal income taxes (2) Accrued Pension 7,852,214. (3) Appliance Stds/Certification Liab. 1,821,013. (4) Deferred Compensation Plan 1,237,820.	Part IX Other Assets.	N/A 'Yes' to Form 990	. Part IV. line 11d. See Form	990. Part X. line 15.
(2) (3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (B). line 15)  Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25 (a) Description of liability (b) Book value (1) Federal income taxes (2) Accrued Pension 7,852,214. (3) Appliance Stds/Certification Liab. 1,821,013. (4) Deferred Compensation Plan 1,237,820.	(a) Des	scription		(b) Book value
(3) (4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (B). line 15)  Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25 (a) Description of liability (b) Book value (1) Federal income taxes (2) Accrued Pension 7,852,214. (3) Appliance Stds/Certification Liab. 1,821,013. (4) Deferred Compensation Plan 1,237,820.	(1)			
(4) (5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (B). line 15)  Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25  (a) Description of liability (b) Book value (1) Federal income taxes (2) Accrued Pension 7,852,214. (3) Appliance Stds/Certification Liab. 1,821,013. (4) Deferred Compensation Plan 1,237,820.			···	
(5) (6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (B), line 15)  Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25  (a) Description of liability (b) Book value (1) Federal income taxes (2) Accrued Pension 7, 852, 214. (3) Appliance Stds/Certification Liab. 1, 821, 013. (4) Deferred Compensation Plan 1, 237, 820.			<del></del>	
(6) (7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (B). line 15)  Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25  (a) Description of liability (b) Book value (1) Federal income taxes (2) Accrued Pension 7, 852, 214. (3) Appliance Stds/Certification Liab. 1, 821, 013. (4) Deferred Compensation Plan 1, 237, 820.				
(7) (8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (B). line 15)  Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25  (a) Description of liability (b) Book value (1) Federal income taxes (2) Accrued Pension 7, 852, 214. (3) Appliance Stds/Certification Liab. 1, 821, 013. (4) Deferred Compensation Plan 1, 237, 820.				
(8) (9) (10)  Total. (Column (b) must equal Form 990, Part X, column (B). line 15)  Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25  (a) Description of liability (b) Book value (1) Federal income taxes (2) Accrued Pension 7, 852, 214. (3) Appliance Stds/Certification Liab. 1, 821, 013. (4) Deferred Compensation Plan 1, 237, 820.				
(9) (10)  Total. (Column (b) must equal Form 990, Part X, column (B). line 15)  Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25  (a) Description of liability (b) Book value (1) Federal income taxes (2) Accrued Pension 7, 852, 214. (3) Appliance Stds/Certification Liab. 1, 821, 013. (4) Deferred Compensation Plan 1, 237, 820.				
Total. (Column (b) must equal Form 990, Part X, column (B). line 15)  Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25  (a) Description of liability (b) Book value  (1) Federal income taxes (2) Accrued Pension 7, 852, 214. (3) Appliance Stds/Certification Liab. 1, 821, 013. (4) Deferred Compensation Plan 1, 237, 820.				<del></del>
Total. (Column (b) must equal Form 990, Part X, column (B). line 15)  Part X Other Liabilities. Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25  (a) Description of liability (b) Book value  (1) Federal income taxes (2) Accrued Pension 7, 852, 214. (3) Appliance Stds/Certification Liab. 1, 821, 013. (4) Deferred Compensation Plan 1, 237, 820.				<del></del>
Part X Other Liabilities.  Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25  (a) Description of liability (b) Book value  (1) Federal income taxes  (2) Accrued Pension 7,852,214.  (3) Appliance Stds/Certification Liab. 1,821,013.  (4) Deferred Compensation Plan 1,237,820.		2) line 15 )	<del></del>	
Complete if the organization answered 'Yes' to Form 990, Part IV, line 11e or 11f. See Form 990, Part X, line 25  (a) Description of liability (b) Book value  (1) Federal income taxes (2) Accrued Pension (3) Appliance Stds/Certification Liab. (4) Deferred Compensation Plan (5) The see Form 990, Part X, line 25 (6) Book value (1) Federal income taxes (2) Accrued Pension (3) Appliance Stds/Certification Liab. (4) Deferred Compensation Plan (5) Revenue Point No. 1, 852, 214. (6) Revenue Point No. 1, 852, 214. (7) Revenue Point No. 1, 852, 214. (8) Appliance Stds/Certification Liab. (9) Deferred Compensation Plan (1) Point No. 1, 852, 214. (1) Point No. 1, 852, 214. (2) Accrued Point No. 1, 852, 214. (3) Appliance Stds/Certification Liab. (4) Deferred Compensation Plan (5) Point No. 1, 852, 214. (6) Point No. 1, 852, 214. (7) Point No. 1, 852, 214. (8) Point No. 1, 852, 214. (9) Point No. 1, 852, 214. (1) Point No. 1, 852, 214. (2) Point No. 1, 852, 214. (3) Appliance Stds/Certification Liab. (4) Deferred Compensation Plan (5) Point No. 1, 852, 214. (6) Point No. 1, 852, 214. (7) Point No. 1, 852, 214. (8) Point No. 1, 852, 214. (9) Point No. 1, 852, 214. (1) Point No. 1, 852, 214. (2) Point No. 1, 852, 214. (3) Point No. 1, 852, 214. (4) Point No. 1, 852, 214. (5) Point No. 1, 852, 214. (6) Point No. 1, 852, 214. (7) Point No. 1, 852, 214. (8) Point No. 1, 852, 214. (9) Point No. 1, 852, 214. (10) Point No. 1, 852, 214. (11) Point No. 1, 852, 214. (12) Point No. 1, 852, 214. (13) Point No. 1, 852, 214. (14) Point No. 1, 852, 214. (15) Point No. 1, 852, 214. (17) Point No. 1, 852, 214. (18) Point No. 1,		3), line 15)		
(a) Description of liability (b) Book value  (1) Federal income taxes  (2) Accrued Pension 7,852,214.  (3) Appliance Stds/Certification Liab. 1,821,013.  (4) Deferred Compensation Plan 1,237,820.	Part X Other Liabilities.	orm 000 Part IV June 11	o or 11f Con Form 000 Dort V June 2	)E
(1) Federal income taxes (2) Accrued Pension (3) Appliance Stds/Certification Liab. (4) Deferred Compensation Plan (5) Federal income taxes (7, 852, 214. (8) 1, 821, 013. (9) Deferred Compensation Plan (1) Federal income taxes (7, 852, 214. (1) 1, 821, 013. (2) 1, 821, 013. (3) 1, 821, 013.			E OF THE SEE FORM 330, PART A, HINE 2	.J
(2) Accrued Pension 7,852,214. (3) Appliance Stds/Certification Liab. 1,821,013. (4) Deferred Compensation Plan 1,237,820.		(b) book value	$\dashv$	
(3) Appliance Stds/Certification Liab. 1,821,013. (4) Deferred Compensation Plan 1,237,820.		7 952 21	<del>a  </del>	
(4) Deferred Compensation Plan 1,237,820.		1,032,21		

(a) Description of Hability	(b) book value
(1) Federal income taxes	
(2) Accrued Pension	7,852,214.
(3) Appliance Stds/Certification Liab.	1,821,013.
(4) Deferred Compensation Plan	1,237,820.
(5) Deferred Rent / Other Liabilities	1,309,078.
(6) Post Retirement Health BenefitsLiab	1,616,189.
(7)	
(8)	
(9)	
(10)	-
(11)	
Total. (Column (b) must equal Form 990, Part X, column (B) line 25)	13,836,314.
2 tradulate for unaportain tay positions. In Bord VIII provide the total of the fortinal	a da dha assassada a la f

2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the organization's liability for uncertain tax positions under FIN 48 (ASC 740). Check here if the text of the footnote has been provided in Part XIII.

See Part XIII. [X]

Part XI   Reconciliation of Revenue per Audited Financial Statements With Revenue per Return. N/A Complete if the organization answered Yes' to Form 990, Part IV, line 12a.  1 Total reverue, gains, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net urriealized gains on investments b Donaled services and use of facilities c Recoveres of prior year grants d Other (Describe in Part XIII) 2 d 2 d 2 d 2 d 2 d 2 d 3 Subtract line 26 from line 1 d 3 d 4 Amounts included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 2 at though 2d 4 d 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5	Schedule D (Form 990) 2013 American Gas Association	13-0431590 Page <b>4</b>
1 Total revenue, gams, and other support per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gams on investments b Donaled services and use of facilities c Recoveres of prior year grants d Other (Describe in Part XIII) 2 d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue. Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  1 Total expenses and losses per audited financial Statements With Expenses per Return. N/A Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements Amounts included on In Part XIII) b Part XIII Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. N/A Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 A mounts included on Form 990, Part IV, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b 4 Amounts included on Form 990, Part VIII, line 7b 4 Dither (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part III, lines 1b and 2b, Part V, line 4, Part X, line 2, Part X, line 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information  Part X-FIN 48 Footnote  The Organization believes that It has appropriate support for any tax positions taken and therefore, does not have any uncertain tax positions that are material to the financial statements.	Part XI Reconciliation of Revenue per Audited Financial Statements With	Revenue per Return. N/A
2 a Net unrealized gains on investments bonated services and use of facilities c Recoveries of prior year grants d 2c d 2d d 2e d 2d d 2e d 2d d 2e d 2e	Complete if the organization answered 'Yes' to Form 990, Part IV, II	ne 12a.
a Net unrealized gams on investments b Donated services and use of facilities c Recoveries of pinor year grants d Other (Describe in Part XIII) p. Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 3a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 1 Total expenses and losses per audited financial Statements With Expenses per Return. N/A Complete if the organization answered Yes' to Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2 be from line 1 4 Amounts included on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2 be from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part III, line 18) 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part III, line 18) 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part III, lines 1b and 2b, Part V, line 4, Part X. FIN 48 Footnote  The Organization believes that it has appropriate support for any tax positions taken and therefore, does not have any uncertain tax positions that are material to the financial statements. At a minimum, the 2010 through 2013 tax years are open for examination by taxing authorities.	1 Total revenue, gains, and other support per audited financial statements	1
b Donaled services and use of facilities c Recoveries of prior year grants d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  1 Total expenses and losses per audited financial Statements With Expenses per Return. N/A Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not in Form 990, Part IX, line 25 a Donaled services and use of facilities b Piror year adjustments c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  Part XIII Supplemental Information.  Part XIII Supplemental Information.  Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part X, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information inches and therefore, does not have any uncertain tax positions that are material to the financial statements. At a minimum, the 2010 through 2013 tax years are open for examination by taxing authorities.	2 Amounts included on line 1 but not on Form 990, Part VIII, line 12	
c Recoveres of prior year grants d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 3 A mounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 Part XIII   Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. N/A Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments C Other losses and use of facilities 1 Amounts included on Form 990, Part IX, line 25, but not on line 1 a investment expenses not included on Form 990, Part IVI, line 7b b Other (Describe in Part XIII) c Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part II, line 18) 5 Total expenses rouncided financial information.  Pounds the descriptions required for Part II, lines 3, 5, and 9, Part IV, lines 1a and 4, Part IV, lines 1b, and 2b, Part V, line 4, Part X, line 2, Part X, lines 2d and 4b, and Part XII, lines 2d and 4b. Also complete this part to provide any additional information  Part X-FIN 48 Footnote  The Organization believes that it has appropriate support for any tax positions taken and therefore, does not have any uncertain tax positions that are material to the financial statements. At a minimum, the 2010 through 2013 tax years are open for	a Net unrealized gains on investments 2a	
d Other (Describe in Part XIII ) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII ) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  1 Total expenses and losses per audited financial Statements With Expenses per Return. N/A Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donaled services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18) Fart XIII Supplemental Information.  Part X: FIN 48 Footnote  The Organization believes that it has appropriate support for any tax positions taken and therefore, does not have any uncertain tax positions that are material to the financial statements. At a minimum, the 2010 through 2013 tax years are open for examination by taxing authorities.	b Donated services and use of facilities 2b	
e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other Obscribe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  [Part XIII   Reconcilitation of Expenses per Audited Financial Statements With Expenses per Return. N/A Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Other losses d Other Obscribe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 a Investment expenses not included on Form 990, Part IV, line 17b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  [Part XIII   Supplemental Information.  Provide the descriptions required for Part III, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part X, line 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information  Part XFIN.48 Footnote  The Organization believes that it has appropriate support for any tax positions taken and therefore, does not have any uncertain tax positions that are material to examination by taxing authorities.	c Recoveries of prior year grants	<del></del>
3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b  5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  1 Total expenses part Audited Financial Statements With Expenses per Return. N/A Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donaled services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  Fart XIII Supplemental Information.  Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part X, lines 2d and 4b, and Part XII, lines 2d and 4b Also complete this part to provide any additional information line 4, Part X, line 2, Part X, lines 2 does not have any uncertain tax positions that are material to the financial statements. At a minimum, the 2010 through 2013 tax years are open for examination by taxing authorities.	d Other (Describe in Part XIII )	
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expense Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)  [Part XII] Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. N/A Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 a Investment expenses not included on Form 990, Part IX, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  Part XIII Supplemental Information.  Part X. FIN 48 Footnote  The Organization believes that it has appropriate support for any tax positions taken and therefore, does not have any uncertain tax positions that are material to the financial statements. At a minimum, the 2010 through 2013 tax years are open for examination by taxing authorities.	e Add lines 2a through 2d.	2 e
a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)    Part XIII   Reconcilitation of Expenses per Audited Financial Statements With Expenses per Return. N/A Complete if the organization answered "Yes" to Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments C Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 3 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b Total expenses Add lines 3 and 4c. (This must equal Form 990, Part II, line 18)    Part XIII   Supplemental Information.	3 Subtract line 2e from line 1	3
b Other (Describe in Part XIII ) c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5 Total expenses and losses per audited financial Statements With Expenses per Return. N/A Complete if the organization answered "Yes" to Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  Part XIII   Supplemental Information.  Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV. lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b, and Part XIII, lines 2d and 4b Also complete this part to provide any additional information  Part X-FIN 4B Footnote  The Organization believes that it has appropriate support for any tax positions taken and therefore, does not have any uncertain tax positions that are material to the financial statements. At a minimum, the 2010 through 2013 tax years are open for examination by taxing authorities.	4 Amounts included on Form 990, Part VIII, line 12, but not on line 1	
c Add lines 4a and 4b 5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12) 5   Part XII   Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. N/A Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a. 1 Total expenses and losses per audited financial statements 2 Amounts included on line 1 but not on Form 990, Part IX, line 25 a Donated services and use of facilities b Prior year adjustments c Other losses d Other (Describe in Part XIII) e Add lines 2a through 2d 3 Subtract line 2e from line 1 4 Amounts included on Form 990, Part IX, line 25, but not on line 1 a Investment expenses not included on Form 990, Part VIII, line 7b b Other (Describe in Part XIII) c Add lines 4a and 4b 5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18)  Part XIII Supplemental Information.  Provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, line 2, Part XI, lines 2d and 4b Also complete this part to provide any additional information  Part X-FIN 48 Footnote The Organization believes that it has appropriate support for any tax positions taken and therefore, does not have any uncertain tax positions that are material to the financial statements. At a minimum, the 2010 through 2013 tax years are open for examination by taxing authorities.	a Investment expenses not included on Form 990, Part VIII, line 7b.	
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Part XII   Reconciliation of Expenses per Audited Financial Statements With Expenses per Return. N/A Complete if the organization answered 'Yes' to Form 990, Part IV, line 12a.  1 Total expenses and losses per audited financial statements	c Add lines <b>4a</b> and <b>4b</b>	4c
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BAA Schedule <b>D</b> (Form 990) 2013	examination_by_taxing_authorities	
BAA Schedule <b>D</b> (Form 990) 2013		
BAA Schedule <b>D</b> (Form 990) 2013		
Schedule D (Form 990) 2013		
	ВАА	Schedule <b>D</b> (Form 990) 2013

#### Schedule F (Form 990)

Statement of Activities Outside the United States

► Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b, 15, or 16.
 ► Attach to Form 990. ► See separate instructions.
 ► Information about Schedule F (Form 990) and its instructions is

at www.irs.gov/form990.

OMB No 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

American Gas Association

Employer identification number

13-0431590 General Information on Activities Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 14b.

1 For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance?

For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States

Activities per Region (The following Part I, line 3 table can be duplicated if additional space is needed)

	Τ		e duplicated if additional space	T	(O.T.)
(a) Region	(b) Number of offices in the region	(c) Number of employees, agents, and independent contractors	(d) Activities conducted in region (by type) (e.g., fundraising, program services, investments,	(e) If activity listed in (d) is a program service, describe specific type of	(f) Total expenditures for and investments in region
		in region	grants to recipients located in the region)	service(s) in region	Pt V
				Acctg.	<del>'==</del> :
(1) North America	<del> </del>		Prog. Serv.	Conference	9,502.
(2) Europe			Prog. Serv.	IGU Meeting	5,584.
East Asia and the	'	·			
(3) Pacific	<del>-</del>		Prog. Serv.	IGU Exec. Cmte.	32,343.
(4) Europe			Prog. Serv.	IGU PGC BD. Mtg.	4,563.
<b>(5)</b> Europe			Prog. Serv.	IGU TF 1 HR	3,216.
(6) Europe		- <del>-</del>	Prog. Serv.	ISO/TC Mtg.	2,809.
East Asia and the					
<pre>Pacific</pre>	<u> </u>		Prog. Serv.	LNG 18	3,201.
(8) Europe			Prog. Serv.	LNG Congress	3,152.
(9) North America			Prog. Serv.	TMAF Energy Sol.	3,099.
(10)					
(11)					
(12)					
(13)	ļ				
(14)					
(15)					
(16)					
(17)					
3 a Sub-total					67,469.
b Total from continuation sheets to Part I					
c Totals (add lines 3a and 3b)	0	0			67,469.

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule F (Form 990) 2013

Page 2

Schedule F (Form 990) 2013 American Gas Association

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
(1)								
(2)								
(3)								
(4)								
(5)								
(9)								
6								
(8)								
(6)								
(10)								
(11)								
(12)								
(13)								
(14)								
(15)								
(16)							i	
the state of the s								

2 Enter total number of recipient organizations listed above that are recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

3 Enter total number of other organizations or entities BAA

Page 3

Schedule F (Form 990) 2013

Peri III

F (Form 990) 2013 American Gas Association

Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered 'Yes' on Form 990, Part IV, line 16. Part III can be duplicated if additional space is needed.

(b) Region (c) Number of cash grant of recipients of recipients and disbursement of control of recipients of recipients of recipients of recipients cash grant of recipients of recipients of recipients of recipients cash grant of mon-cash assistance recipients of recip																	
											3	ļ					
(a) Type of grant or assistance	(1)	(2)	(3)	(4)	(5)	(9)	ω	(8)	(6)	(10)	(11)	(12)	(13)	(14)	(15)	95	(71)

Schedule <b>F</b> (	(Form 990)	2013	American	Gas	Association
ochedule i i	(1 01111 220)	, 2013	VIII TEAT	Gas	ASSOCIALION

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13-0431590

Schedule **F** (Form 990) 2013

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Pa	和Will Foreign Forms		
1	Was the organization a U S transferor of property to a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 926, Return by a U S Transferor of Property to a Foreign Corporation (see Instructions for Form 926)	Yes	X No
2	Did the organization have an interest in a foreign trust during the tax year? If 'Yes,' the organization may be required to file Form 3520, Annual Return To Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A)	Yes	X No
3	Did the organization have an ownership interest in a foreign corporation during the tax year? If 'Yes,' the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To Certain Foreign Corporations (see Instructions for Form 5471)	Yes	X No
4	Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund during the tax year? If 'Yes,' the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund (see Instructions for Form 8621)	Yes	X No
5	Did the organization have an ownership interest in a foreign partnership during the tax year? If 'Yes,' the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Foreign Partnerships. (see Instructions for Form 8865)	Yes	X No
6	Did the organization have any operations in or related to any boycotting countries during the tax year? If 'Yes,' the organization may be required to file Form 5713, International Boycott Report (see Instructions for Form 5713)	Yes	X No

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13-0431590

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Schedule F (Form 990) 2013

# SCHEDULE I

Department of the Treasury Internal Revenue Service Name of the organization

Governments, and Individuals in the United States Grants and Other Assistance to Organizations,

Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 or 22. ► Attach to Form 990.

OMB No 1545-0047

2013

► Information about Schedule I (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection Employer identification number 13-0431590

1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? American Gas Association
Part | General Information on Grants and Assistance

2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

See Part IV

**ջ** □

X Yes

Part II Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered 'Yes' to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Part II can be duplicated if additional space is needed.

1 (a) Name and address of organization or government	(b) EIN	(c) IRC section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV, appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance
(1) Baton Rouge Comm. Coll. Fndn. 201 Community College Drive. Baton Rouge, LA 70806	72-1415610 501 (c) (3)	501 (c) (3)	30,000	0			Scholarshins
(2) Bishop St. Comm. Coll. Fndn	63-0507477 501 (c) (3)	501 (c) (3)	30,000	0		Ī	Schol arehine
(3) Bismarck State College FndnBismarck, ND 58506	45-0358929 501 (c) (3)	501 (c) (3)	30,000.	.0			Scholarshins
(4) Butte_College_Foundation	94-3153995 501 (c) (3)	501 (c) (3)	30,000.	.0		3	Scholarships
(5) Cal Poly Pomona Foundation - 3801 West Temple Avenue Pomona, CA 91768	95-2417645 501 (c) (3)	501 (c) (3)	. 20, 000	.0			Scholarships
(6) Centrl Pledmnt Comm Coll Endn - 1201 Elizabeth Avenue Charlotte, NC 28204	56-0890420 501 (c) (3)	501 (c) (3)	30,000.	0			Schol archine
(7) City Colleges of Chicago Fndn - 226 West Jackson Blvd. Chicag Chicago, IL 60606	36-3157624 501 (c) (3)	501 (c) (3)	30,000.	.0			Scholarships
(8) Clackamas Comm College Fndn	93-0579576 501 (c) (3)	501 (c) (3)	30,000.	.0			Scholarships
<ul><li>2 Enter total number of section 501(c)(3) and government organizations</li><li>3 Enter total number of other organizations listed in the line 1 table</li></ul>	and government o	suoi	listed in the line 1 table			<b>A A</b>	27
BAA For Paperwork Reduction Act Notice, see the Instructions for Form 9	see the Instruction	s for Form 990.		TEEA3901L	07/12/13	Schedul	Schedule I (Form 990) (2013)

BAA

Schedule I (Form 990) (2013)

#### **SCHEDULE J** (Form 990)

### **Compensation Information**

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

Complete if the organization answered 'Yes' on Form 990, Part IV, line 23.

Attach to Form 990.

See separate instructions.

Information about Schedule J (Form 990) and its instructions is at www.irs.gov/form990.

Open to Public Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

Employer identification number 13-0431590 American Gas Association

Par	I Questions Regarding Compensation				
	<u> </u>	· · · · · · · · · · · · · · · · · · ·		Yes	No
1 a	Check the appropriate box(es) if the organization provided any oVII, Section A, line 1a Complete Part III to provide any rele	of the following to or for a person listed in Form 990, Part evant information regarding these items			
	First-class or charter travel	Housing allowance or residence for personal use			,
	Travel for companions	Payments for business use of personal residence			
	Tax indemnification and gross-up payments	Health or social club dues or initiation fees			1
	Discretionary spending account	Personal services (e g , maid, chauffeur, chef)			
		Transfer de y maid, and anoun, and y			İ
t	If any of the boxes on line 1a are checked, did the organization reimbursement or provision of all of the expenses described		1 b	X	
2	Did the organization require substantiation prior to reimbursing of trustees, and officers, including the CEO/Executive Director	or allowing expenses incurred by all officers, directors, , regarding the items checked in line 1a?	2	X	1
3	Indicate which, if any, of the following the filing organization use CEO/Executive Director Check all that apply Do not check establish compensation of the CEO/Executive Director, but	any boxes for methods used by a related organization to			
	X Compensation committee	X Written employment contract			
	Independent compensation consultant	X Compensation survey or study			1
	X Form 990 of other organizations	$\overline{\overline{\mathbf{X}}}$ Approval by the board or compensation committee			ı
4	During the year, did any person listed in Form 990, Part VII or a related organization	, Section A, line 1a with respect to the filing organization			
a	Receive a severance payment or change-of-control paymen	rt?	4 a		Х
	Participate in, or receive payment from, a supplemental nor	•	4 b	_X_	
C	Participate in, or receive payment from, an equity-based co		4 c		X
	If 'Yes' to any of lines 4a-c, list the persons and provide the	e applicable amounts for each item in Part III			!
	Only section 501(c)(3) and 501(c)(4) organizations must co	mplete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, contingent on the revenues of $$	did the organization pay or accrue any compensation			ا
a	The organization?		5 a		
t	Any related organization?		5 b		
	If 'Yes' to line 5a or 5b, describe in Part III				
6	For persons listed in Form 990, Part VII, Section A, line 1a, contingent on the net earnings of	did the organization pay or accrue any compensation			
a	The organization?		6 a		
t	Any related organization?		6 b		<u> </u>
	If 'Yes' to line 6a or 6b, describe in Part III			_	
7	For persons listed in Form 990, Part VII, Section A, line 1a, payments not described in lines 5 and $6^{\circ}$ If 'Yes,' describe	did the organization provide any non-fixed in Part III	7		
8	Were any amounts reported in Form 990, Part VII, paid or a				
	to the initial contract exception described in Regulations set If 'Yes,' describe in Part III	ction 53 4958-4(a)(3)?	8		
9	If 'Yes' to line 8, did the organization also follow the rebuttable p section 53 4958-6(c)?	presumption procedure described in Regulations	,		

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2013

Schedule J (Form 990) 2013

Schedule J (Form 990) 2013 American Gas Association

13-0431590

Afficers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

Page 2

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

Note. The sum of columns (B)(I)-(III) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable columns (D) and (E) amounts for that individual

		(B) Breakdown of	W-2 and/or 1099-MISC compensation	C compensation	(C) Retirement	(D) Nontaxable	(E) Total of	(F) Compensation
(A) Name and Title		(I) Base compensation	(ii) Bonus and incentive compensation	(III) Other reportable compensation	and other deferred compensation	benefits		reported as deferred in prior Form 990
rdy	())	- 928, 855	465,000.	74,444.	348,650.	41, 502.	1,858,451.	0
1 President & CEO	( <u>ii</u> )	0.	이		0.	0	   	0.
Kevin B.	€	-267.294.	<u>60_00</u>	96, 377.	155,608.	30,722.	610,001.	0.
2 Sr. VP & GC	( <u>ii</u> )		0.		ı	0	1	0.
	Θ	234,294.	100,000	$-\frac{29}{566}$ .	49,700.	30, 722.	444, 282.	0
3 CF&AO	<u>(i)</u>	0.	0.		0	0		0.1
>	Θ	212,470.	35,000.	18,450.	60,204.	20,315.	346,439.	0
4 VP & Secretary	<u>(ii)</u>		0	 	0	0.	į į	0.0
Lori	Θ	344, 500.	135,500.	53,566.	50,684.	4,826.	589,076.	0.
5 Sr. VP & COO	(ii)		0		 		1	0.
Paula Gant	Ξ	183,079.	128,593.	21,322.	23,611.	22,761.	379, 366.	0.
6 Sr. VP - Policy & Planning	⊕		0	l 	   		į	
	Ξ	-228,134.	50,000	18,011.	38,939.	22,498.	357, 582.	ő
7 VP - Operations & Engineering	€		0	   	1	0	1	0.
Jason K.	Ξ	-210,181.	35,000.	17,824.	53,472.	13,000.	329, 477.	0.
8 VP -Govt Relations	<u> </u>	0.	0.			0.	 	
	Θ	194,500.	30,500.	17,694.	11,500.	4,105.	258, 299.	0
9 VP - Pol. Strategy	⊕				.0	0.	 	0.
George Lowe	Ξ	202, 500.	35,500.	17,704.	7,650.	4,159.	267, 513.	0.
al Affairs	<u> </u>	0.	0		0	i	 	
Chris B. McGill	Ξ	189,921.	25_374	$-\frac{18}{767}$ .	140,820.	18,813.	393, 695.	0.
11 VP - Pol. Analysis	€					 	[ [	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -
lrew K. Soto	€	183,748.	10,500.	23,439.	34,570.	4,089.	256, 346.	0
12 VP - Req. Affairs	€					ĺ	!	           
	Ξ	1 1		1 1 1				
13	€							 
	Ξ							
14	<u>(ii)</u>				 	! ! ! !	             	
	Θ							
15	€							
16	€€	           	           			1		
ВАА			TEEA4102L 07/08/13	13			Schedule J (	(Form 990) 2013

Schedule J (Form 990) 2013

Schedule J (Form 990) 2013

#### **SCHEDULE O** (Form 990 or 990-EZ)

#### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

OMB No 1545-0047 2013

> Open to Public Inspection

► Information about Schedule O (Form 990 or 990-EZ) and its instructions is at www.irs.gov/form990. Department of the Treasury Internal Revenue Service

Name of the organization Employer identification number 13-0431590 American Gas Association Form 990, Part I, Line 1 - Organization's Mission Approved by the AGA Board on 9/15/09. The American Gas Association represents companies delivering natural gas to customers to help meet their energy needs. AGA members are committed to delivering natural gas safely, reliably, cost-effectively and in an environmentally responsible way. AGA advocates the interests of its members and their customers, and provides information and services promoting efficient demand and supply growth, and operational excellence, in the safe, reliable and efficient delivery of natural gas. Form 990, Part III, Line 1 - Organization Mission Approved by the AGA Board on 9/15/09. The American Gas Association represents companies delivering natural gas to customers to help meet their energy needs. AGA members are committed to delivering natural gas safely, reliably, cost-effectively and in an environmentally responsible way. AGA advocates the interests of its members and their customers, and provides information and services promoting efficient demand and supply growth, and operational excellence, in the safe, reliable and efficient delivery of natural gas. To further this mission, AGA: Focuses on the advocacy of natural gas issues that are priorities for the membership and that are achievable in a cost effective way. Promotes growth in the efficient use of natural gas on behalf of natural gas utilities, and the customers the industry serves, by emphasizing before a variety of audiences the attributes of natural gas as a clean, abundant, efficient and secure energy source that is recognized as part of the solution to the nation's environmental and energy efficiency goals.

Name of the organization	Employer identification number
American Gas Association	13-0431590
Form 990, Part III, Line 1 - Organization Mission	
Encourages, facilitates, and assists members in sharing informa	tion designed to
achieve operational excellence by improving their safety, secur	ity, reliability,
efficiency, and environmental and other performance metrics; A	ssists members in
managing and responding to customer energy needs, regulatory tr	ends, natural gas
markets, capital markets and emerging technologies; facilitates	the identification
of, and advocates for, regulatory constructs and business model	s that provide
members the opportunity to remain financially viable, while all	owing them to grow.
Collects, analyzes and disseminates information on a timely bas	is to opinion
leaders, policy makers and the public about the benefits provid	ed by energy
utilities and the natural gas industry.	
Encourages the identification, development, demonstration and r	egulatory acceptance
of end-use technologies that will allow energy efficient natura	l gas applications to
successfully enter the market place	
Delivers measurable value to AGA members.	
Form 990, Part III, Line 2 - New Services	
The International Conference and Exhibition on Liquefied Natura	l Gas is held every
three years under the auspices of the International Gas Union (	IGU), the Gas
Technology Institute (GTI) and the International Institute of R	efrigeration (IIR).
The conference is widely viewed as the largest and most prestig	ious of LNG
conferences. AGA is a member of the IGU, many of its members op	erate LNG facilities
in their natural gas distribution operations, and LNG is a crit	ical factor in
ensuring natural gas supply. The American Gas Association chair	ed the National
Organizing Committee (NOC) for the 17th International Conference	e & Exhibition on

Name of the organization	Employer identification number
American Gas Association	13-0431590
Form 990, Part III, Line 2 - New Services	
Liquefied Natural Gas (LNG 17), held in Houston, Texas, April	16-19, 2013. The NOC
is responsible for the venue selection, management of the vende	ors related to the
exhibition, the meeting planning, and registration and associate	ted functions, and is
responsible for the financing of the event. About 13,000 indiv	iduals from 80
countries attended LNG 17 in some capacity, as a conference de	legate or as a visitor
to the 250,000 square foot exhibition. Revenue collected and exhibition to the 250,000 square foot exhibition.	xpenses incurred were
recognized in 2013. Revenue collected and expenses incurred pr	ior to 2013 were
classified as Prepaid LNG 17 expenses and Deferred LNG 17 confe	erence and exhibition
revenue on the consolidated statements of financial posotion.	
Form 990, Part III, Line 4a - Program Service Accomplishments	
PUBLIC AFFAIRS.	
AGA has in place a Public Affairs program to monitor federal le	egislative activities
and to discuss with members of Congress and their staff the vic	ews of AGA members on
these activities. AGA's government relations efforts play a key	y role in protecting
the interests of the natural gas utility and its customers from	n proposed legislation
that inadvertently or otherwise could have serious impacts on o	gas supply, the cost of
gas service, reliability and/or safety.	
- Low Income Home Energy Assistance Program (LIHEAP): AGA's one	going effort with
Congress to obtain funding for the federal Low Income Home Energy	rgy Assistance Program
resulted in final FY 2013 appropriations of \$3.4 billion. This	program is essential
in_reducing the financial burden of those on low and fixed income	omes as they provide
themselves with needed basic energy services.	
- President Obama's Climate Action Plan outlined a key role for	natural gas and

Name of the organization	Employer identification number
American Gas Association	13-0431590
Form 990, Part III, Line 4a - Program Service Accomplishments	
called for strengthening our nation's position as the world lea	der in producing clean
natural gas and continuing the progress achieved in reducing ca	arbon emissions by
using this abundant fuel	
Form 990, Part III, Line 4b - Program Service Accomplishments	
OPERATIONS & ENGINEERING.	
The Operations and Engineering Section includes 14 technical co	ommittees whose work
is overseen by a Managing Committee. These committees focus on	helping natural gas
utilities achieve operational excellence in the safe, reliable	and_efficient
delivery of natural gas	
The fourteen technical committees are: 1) Corrosion Control Com	mittee;
2) Distribution Construction and Maintenance Committee; 3) Distribution	ibution Measurement
Committee; 4) Distribution & Transmission Engineering Commi	ttee; 5)
Environmental Matters Committee; 6) Gas Control Committee; 7) N	Matural Gas Security
Committee; 8) Plastic Materials Committee; 9) Safety and Occupa	tional Health
Committee; 10) Supplemental Gas Committee; 11) Transmission Mea	surement Committee;
12) Transmission Pipeline Operations Committee; 13) Underground	l Storage Committee;
and 14) Utility and Customer Field Services Committee.	
The Operations and Engineering Section provides timely and rele	vant information to
help member companies achieve operational excellence in the saf	e, reliable and
efficient delivery and use of natural gas. The 2013 information	exchanges included:
- Gas Utility Operator's Best Practices Program: AGA's Best Pra	ctices Program is an
effort_to_identify_procedures_of_superior_performing_gas_indust	ry companies and

_	_
RΔ	Δ

cybersecurity.

Name of the organization	Employer identification number
American Gas Association	13-0431590
Form 990, Part III, Line 4c - Program Service Accomplishments	
POLICY, PLANNING & REGULATORY AFFAIRS.	
AGA's Policy, Planning and Regulatory Affairs Section work in	2013 involved: the
dissemination of information and analysis of the economic and	physical_condition_of
the natural gas industry; the analysis of state and federal re	gulatory_regimes_under
which natural gas utilities are directly regulated; and securi	ng recognition of the
benefits of natural gas in federal energy, environmental and e	missions policies.
The Section's Policy Analysis Group provided a vast array of d	ata about all aspects
of the natural gas industry and collected and compiled it in r	eady-reference form.
Among the 2013 publications were: GAS FACTS; Preliminary Chang	es in Annual Natural
Gas Reserves and Winter Heating Season Supply Portfolio Buildi	ng.
AGA_also undertook_a wide range of analyses on environmental,	Ilnancial, gas supply,
gas demand, consumer cost, capital requirements, resource effi	ciency and other
issues facing the gas industry. These analyses assisted the ge	neral public, members
and other decision-makers in resolving the country's current e	nergy problems and in
establishing public policies that will be in the nation's best	interest.
Form 990, Part III, Line 4d - Other Program Services Description	
CORDODATE AFFATES DOCEDAMS	
CORPORATE AFFAIRS PROGRAMS.	
Condinates magnitude and activities of support as activities	ACA members accessed to
Coordinates recruitment and retention of current or potential	AGA member companies;
conducts outreach to the financial community to enhance their	understanding of key
issues affecting gas utilities and provides support services f	or AGA's committee

Name of the organization	Employer identification number
American Gas Association	13-0431590
Form 990 Part III Line 4d Other Program Services Description	
Form 990, Part III, Line 4d - Other Program Services Description	
meetings and conferences.	
GENERAL COUNSEL PROGRAMS.	
The Office of General Counsel assists member company attorneys	in more effectively
norforming their duties, thereby helping these companies energy	o mana officiently
performing their duties, thereby helping those companies operat	te more erriciently.
For example, AGA offers litigation alerts, legal forums and wor	kshops, antitrust
_compliance programs, assistance to members in potentially prece	edent setting
compilation_programs, assistance_co_members_in_potentially_preci	dene_secting
litigation, as well as, analyses and legal summaries. In additi	on, AGA annually
updates and publishes the AGA FERC Manual which is a regulatory	compliance quide
directed at natural gas utility members.	
INDUSTRY FINANCE & ADMINISTRATIVE PROGRAMS.	
The Discovial and Administrative many development and include	
The Financial and Administrative group develops and implements	programs in the
follwing areas: accounting, customer service, human resources,	risk management and
information technology. These programs help member companies op	nerate more
INTOTEMACTOR CCCMIO1049. These programs help member companies of	Serate more
efficiently. For example, in the customer service area, AGA's D	ata Source is the
utility industry's premier tool for benchmarking customer servi	ce programs. Subjects
covered include: call centers, energy assistance programs, bill	ing and meter
reading. A powerful online search engine enables members to ret	rieve data
efficiently, thereby increasing employee productivity. AGA spon	sors accounting
workshops and training programs on cutting edge issues facing o	our member companies.

Name of the organization	Employer identification number
American Gas Association	13-0431590
Form 990, Part VI, Line 1a - Explanation of Delegated Broad Authority to Commi	ttee
The Association's bylaws, under Article VII, Section 2 provides	that the Board of
Directors may appoint an Executive Committee. The Executive Com	mittee is elected by
the entire Board and may exercise certain powers of the Board d	uring the intervals
between meetings of the Board. The Executive Committee is gener	ally comprised of the
Board Officers and not less than 7 other members of the Board.	AGA Board members are
executives_of_AGA_full_members	
Part VI, Line 1b - The eleven (11) non-independent non-compensa	ted volunteer AGA
Board members reflected in response to Part I, questions 3 and	4, and Part VI,
Section A, questions 1a and 1b, are non-compensated volunteer m	embers of the
American Gas Foundation board. AGA has an agreement with the Am	erican Gas Foundation
to_provide it_with_management and administrative services	
Form 990, Part VI, Line 6 - Explanation of Classes of Members or Shareholder	
The Association has five classes of members under Article III o	f it's Bylaws. Full
members include United States gas distribution public and munic	ipal utilities and
have voting rights. Limited, Associates, International members	and International
Affiliates can participate on certain committees, take advantag	e of educational
opportunities and participate in other applicable activities.	
Form 990, Part VI, Line 7a - How Members or Shareholders Elect Governing Bod	¥
The Association is a membership organization and full members n	ominate and elect
members of the Board of Directors (the Associations principal go	verning body) at the
Association's Annual Meeting.	
Form 990, Part VI, Line 7b - Decisions of Governing Body Approval by Members or	Shareholders
The members of the Association make certain decisions, such as,	the election of the
principal governing body(Board of Directors) as outlined in the	organization's
bylaws at the annual or special meetings of the Association. Sp	ecial meetings may be

Name of the organization	Employer identification number					
merican Gas Association 13-0431590  Form 990, Part VI, Line 7b - Decisions of Governing Body Approval by Members or Shareholders (continued)						
Form 990, Part VI, Line 7b - Decisions of Governing Body Approval by Members or	Shareholders (continued)					
called by the membership to address any issues or guestions.						
The Association's governing bodies are active in a number of wa	ys. The Association					
members elect a Board of Directors (BOD) from the the membership	. Committees related					
to financial oversight, compensation and governance are establi	shed by the BOD.					
These include the Executive Committee, Board Finance Committee,	Board Audit					
Committee (CEOs, some of who have a CPA designation and public a	ccounting					
backgrounds) and Board Compensation Committee (BOD Chair, Vice C	hair,2nd Vice					
Chair, and other BOD members usually with leadership roles in th	e Association). The					
Audit Committee Chair is a member of the Board of Directors and	provides regular					
reports of the Audit Committee to the Board of Directors.						
Form 990, Part VI, Line 11b - Form 990 Review Process						
The Association's internal process for review of tax forms is e	xtensive. For the					
Form 990, the Association's Controller(also a CPA) and Assistant	Controller draft the					
form with input from the staff review group(SRG), composed of a	ppropriate staff					
officers and accountants. A draft 990 is then provided to the o	utside auditing firm,					
the CEO, the Chief Financial Officer(CFO), the General Counsel	and others. The					
Controller then has responsibility to circulate the comments to	the SRG and					
incorporate appropriate corrections into the 990. The final dra	ft is then prepared					
for SRG approval and provided to the Audit Committee. The CFO r	eviews the 990 with					
the Audit Committee. The Audit Committee Chairman reports on t	his review to the					
Board of Directors. The 990 is provided to the Board of Director	rs before it is					
filed.						
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Con	flicts					
The organization has new employees review and sign a statement	of compliance with					
the conflict of interest policy at the time of hiring. All empl	oyees and Board					
members have a continuing duty to report any actual or potentia	l conflict of					

Name of the organization	Employer identification number
American Gas Association	13-0431590
Form 990, Part VI, Line 12c - Explanation of Monitoring and Enforcement of Conflic	ts (continued)
interest in accordance with the policy and annually sign a sta-	tement of compliance.
New_Board_Members_(NBM)_attend_a_Board_orientation_session_wit	h the organization's
Chairman, President, Chief Financial Officer, General Counsel	and others where the
Association's policies are reviewed. NBMs make a declaration of	f any potential
conflict of interest. All Board members have a continuing duty	to report any actual
or potential conflict. The potential conflicts for Board member	rs, officers,
employees and others are reviewed by the Association's CEO, Ger	neral Counsel, CFO and
Human Resources Director and a schedule is prepared and furnish	hed to the independent
auditors and made available to the AGA Audit Committee. More de	etail is provided in
the policy.	
Form 990, Part VI, Line 15a - Compensation Review & Approval Process - CEO, Top	Management
The CEO's compensation is first discussed by the Board Compens	ation Committee with
an independent consulting firm specializing in non-profit organ	nizations to determine
the Board Compensation Committee's recommendation to the Board	of Directors. The
Chairman of the Board then presents the recommendations and re-	asons for the CEO
compensation adjustment, if any, for a vote by the full Board.	Contemporaneous
substantiation of the deliberations, decisions and Board of Dis	rectors action is
maintained in the Human Resources files and the minutes of the	Compensation
Committee and Board of Director's.	
Form 990, Part VI, Line 15b - Compensation Review & Approval Process - Officers	& Key Employees
The Association uses a multifaceted approach to determining con	mpensation for it's
CEO, officers and employees. This includes establishing written	n position
descriptions, salary ranges for positions, setting position go	als, providing written
performance evaluations, measurement of performance, quarterly	, semi-annual or
annual goal review, and contemporaneous substantiations of the	process. The
Association's current compensation policy dated November 30, 20	011 describes the

Employer identification number

American Gas Association	13-0431590
Form 990, Part VI, Line 15b - Compensation Review & Approval Process	s - Officers & Key Employees (continued)
process in more detail. The Association also retains a	n independent compensation
consulting firm to advise the Board Compensation Commi	ttee_and_officers
Compensation adjustments usually are recommended by su	pervisors and approved by
managers, directors and/or officers. Adjustments must	also be approved by the Human
Resources Director. Officer's individual salary adjust	ments are recommended to the
Board Compensation Committee by the CEO, must be appro-	ved by the Board Compensation
committee after review, and reported to the Board of D	rectors.
Form 990, Part VI, Line 19 - Other Organization Documents Publicly	Available
The organization makes the information available in a	number of ways. The
organization's governing documents, officers, board me	mbers and members are
available_on_AGA's_website(www.aga.org)_under_"About_A	GA. " The conflict of interest
policy is also available under "About AGA."	
Financial Statements are provided to the entire Board	and others on a quarterly
basis. Annual audited financial statements are provide	d to the entire membership.
Financial, governance and other information can also be	e obtained from the
Association electronically by request under "Contact U	s" on the website or by mail.

# SCHEDULE R (Form 990)

E

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered 'Yes' on Form 990, Part IV, line 33, 34, 35b, 36, or 37.
 Attach to Form 990.

Information about Schedule R (Form 990) and its instructions is at www.irs.gov/form990.

OMB No 1545-0047 2013

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(g) Sec 512(b)(13) controlled entity? ž (f)
Direct controlling
entity Part II Identification of Related Tax-Exempt Organizations Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year. Yes × Employer identification number (f)
Direct controlling
entity 13-0431590 N/A (e) End-of-year assets (e)
Public charity status
(if section 501(c)(3)) Part I Identification of Disregarded Entities Complete If the organization answered 'Yes' on Form 990, Part IV, line 33. **(d)** Total income (d) Exempt Code section 527 (c)
Legal domicile (state or foreign country) (c)
Legal domicile (state or foreign country) Ы (b) Primary activity Political Action (b)
Primary activity Committee (a) Name, address, and EIN (if applicable) of disregarded entity (a) Name, address, and EIN of related organization American Gas Association 1111 Name of the organization 111 1 1 1

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Schedule R (Form 990) 2013

TEEA5001L 06/26/13

BAA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

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Schedule R (Form 990) 2013 American Gas Association

13-0431590 Part III Identification of Related Organizations Taxable as a Partnership Complete if the organization answered 'Yes' on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign)	(d) Direct controlling entity	Predominant income (related, unrelated, excluded from tax under sections		Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		Code V-UBI amount in box 20 of Schedule K-1 (Form	General or managing partner?		(k) Percentage ownership
שבב נמור		country)		512-514,				Yes	No	1065)	Yes	°N	
(b)													!
		·····	N/A			0	0	-	×	A/N		×	
(2)												:	
(3)			!						-				
												-	
Part IV Identification o	<b>Identification of Related Organizations Taxable as a Corporation or Trust</b> Complete if the organization answine 34 because it had one or more related organizations treated as a corporation or trust during the tax year.	<b>izations</b> nore relat		a Corporation or Trust Complete of the organization answered 'Yes' on Form 990, Part IV, ations treated as a corporation or trust during the tax year.	<b>on or Trust</b> C as a corpor	complete if ation or tru	the organiz st during th	ation ans e tax yea	swered ar.	1 'Yes' on Fo	rm 990,	Part	, >
<b>(a)</b> Name, address, and EIN of related organization	of related organization		(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	Type of entity (C corp, S corp, or trust)		(f) Share of total income	Share	Share of end-of- Py year assets 0	(h) Percentage ownership	() Sec 512(b)(13) controlled entity?	(b)(13) d entity?
t		+		;			,					Yes	N <sub>o</sub>
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		<del>-</del>											
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(3)													
		<del>-11-</del>											
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13-0431590

Part V Transactions With Related Organizations Complete of the organization answered 'Yes' on Form 990, Part IV, line 34, 35b, or 36.

Note. Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule	edule				Yes	2
During the tax year, did the organization engage in any of the following	ions with one or more related organizations lis	ted in Parts II-IV?				
a Receipt of (i) interest (ii) annuities (iii) royalties or (iv) rent from a controlled entity	ed entity			18		×
b Gift, grant, or capital contribution to related organization(s)				1 P	-	×
<ul> <li>Giff, grant, or capital contribution from related organization(s)</li> </ul>				10		×
d Loans or loan guarantees to or for related organization(s)				7	$\dagger$	: >
e Loans or loan quarantees by related organization(s)				3 ,	+	<b>:</b>  >
				9		$\times$
( ) moderne from to lot of a constant of the					-	- 1 :
				16		×
				19		×
h Purchase of assets from related organization(s)				-		×
i Exchange of assets with related organization(s)				-	-	: >
j Lease of facilities, equipment, or other assets to related organization(s)				:	$\dagger$	< >
						4
k Lease of facilities, equipment, or other assets from related organization(s)				-		>
I Performance of services or membership or fundraising solicitations for related organization(s)	ated organization(s)			=	-	: ×
m Performance of services or membership or fundraising solicitations by related organization(s)	ited organization(s)			E		×
assets with	related organization(s)			ר	×	
<ul> <li>Sharing of paid employees with related organization(s)</li> </ul>				10		×
-						·
<b>p</b> Reimbursement paid to related organization(s) for expenses				1 p		×
q Reimbursement paid by related organization(s) for expenses				19	-	×
				-		×
ωl				18		×
2 If the answer to any of the above is 'Yes,' see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	who must complete this line, including covere	d relationships and tran	saction thresholds			
(a) Name of related organization		(b) Transaction type (a-s)	(c) Amount involved	(d) Method of determining amount involved	etermir	nıng d
(1) See Part VII						
(2)						
(3)						
(4)					!	
(9)						
(9)						
ВАА	TEEA5003L 06/27/13		Schedu	Schedule R (Form 990) 2013	990) 2	2013

Schedule R (Form 990) 2013 American Gas Association

Part VI Unrelated Organizations Taxable as a Partnership Complete If the organization answered 'Yes' on Form 990, Part IV, line 37.

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

		1						;					
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign	Predominant income (related income	Are all partners section 501(2)(3)		Share of total income	Share of end-of-year	Dispropor- tionate		Code V-UBI amount in box	General or managing		Percentage ownership
			lated, excluded from tax under	organizat	hons?	_					3	<u> </u>	
			section 512-514)	Yes	٥			Yes	°N		Yes	ę	
(1)												<u> </u>	
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(2)									<u> </u>			$\vdash$	
(3)									<u>}</u>				
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(8)												+	
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ВАА			TEE	TEEA5004L 0	06/27/13					Schedule R (Form 990) 2013	<b>5</b>	um 990)	2013

Schedule R (Form 990) 2013 American Gas Association	13-0431590	Page <b>5</b>
Provide additional information for responses to questions on Schedule R (see	instructions).	
Part III - Partnership Full Name, Address, FEIN		
Part VII - Supplemental Information		
Form 990, Pt. V, Line 2 Transactions with Related Organizations		
Col A - Name of Organization = American Gas Association PAC		
Col B - Transaction Type = M		
<u>Col C - Amount Involved = \$0 (The total costs of sharing Faciliti</u>	.es	
etc., were less than the \$50,000 threshold)		
Col D - Determination Method = N/A		
		· <del></del> -
		<b>_</b>

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# Schedule C, Part IV - Supplemental Information

Page 4

Client AGA2011

### **American Gas Association**

13-0431590

11/05/14

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Schedule C,	Part I-C,	Line 5
Section 527	<b>Political</b>	<b>Organizaitons</b>

			Amount Paid Fr. Internal	Pol. Contrs.
Name GASPAC	Address 400 North Capitol St., NW Washington, DC 20001	FEIN 13-0431590	Funds	<u>Received</u> 24,586.
Alabamians for Luther Strange, Inc.	P.O. Box 3196 Montgomery, AL 36109	20-2909004	500.	
Scott Pruitt for Attorney General	P.O. Box 2083 Oklahoma City, OK 73101	27-2153078	235.	I
Community Leaders of America	5707 Abilene Trl Austin , TX 78749	46-3149989	5,000.	
Democratic Governors' Association	1401 K Street, N.W. Washington, DC 20005	52-1304889	20,000.	
Friends of Bryce Reeves	P.O. Box 7022 Fredericksburg, VA 22404	32-0365003	1,000.	
GOPAC	1101 16th Street, N.W. Washington, DC 20036	52-1237780	14,500.	
Republican Governors' Association	1747 Pennsylvania Ave. NW Washington, DC 20006	52-1174414	20,000.	
Republican State Leadrshp Committee	1201 F Street, N.W. Washington, DC 20004	05-0532524	30,000.	
Schmidt for Attorney General, Inc.	P.O. Box 804 Independence, KS 67301	27-0950779	1,000.	

2013

## Schedule I, Part IV - Supplemental Information

Page 3

Client AGA2011

#### **American Gas Association**

13-0431590

11/05/14

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### Part I, Line 2 - Procedures for Monitoring Use of Grants Funds in U.S. (continued)

California State Polytechnic University, Pomona - \$2,500.

Colorado School of Mines - \$2,500.

Pennsylvania College of Technology - \$2,500.

Stevens Institute of Technology - \$2,500.

2013

# Schedule O - Supplemental Information

Page 10

Client AGA2011

**American Gas Association** 

13-0431590

11/05/14

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Form 990, Part XI, Line 9 Other Changes In Net Assets Or Fund Balances

Financial Accounting Standards No. 158.

Total  $\frac{$11,205,137}{$11,205,137}$ .

#### Form 990

### **Continuation Sheet for Form 990**

OMB No 1545-0047

2013

Department of the Treasury Internal Revenue Service

Name of the Organization

Employler Identification number

13-0431590

American Gas Association

Part VII | Continuation: Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average	Position (check all that apply)						Reportable	Reportable compensation from	Estimated
	Average hours per week (list any hours for related organiza- tions below dotted line)	Individual trustee or director	institutional trustee	Officer	Key employee	Highest compensated employee	Former	compensation from the organization (W-2/1099-MISC)	compensation from related organizations (W-2/1099-MISC)	amount of other compensation from the organization and related organizations
Richard J. Mark Director	$-\frac{1}{0}$	Х						0.	0.	0.
James T. McManus, II	$-\frac{1}{0}$	v						0	0	
Director	0	X						0.	0.	0.
Scott Miller	-1								ا م	0
Director	0 1	X	-					0.	0.	0.
K. Frank Morehouse		v						ا ا	,	0
Director	0 1	X	$\vdash$		_			0.	0.	0.
Scott Morris		Х						0.	0.	0
Director Pierce H. Norton, II	1 1		H				}—	U.		0.
Director	<del> </del>	Х						0.	0.	0.
Morgan K. O'Brien	1	<del>  ^</del> -			-		-			
Director	<del> </del>	Х						0.	0.	0.
Rodney O. Powell	1		_		_		$\vdash$	0.	U.	
Director	<del> </del>	X						0.	0.	0.
Scott M. Prochazka	1	^-					<del>                                     </del>	0.		0.
Director	<del> </del>	х					1	0.	0.	0.
John G. Russell	1	<del>- ^</del> -	$\vdash$		$\dashv$					
Director	<del></del>	х						0.	0.	0.
George A. Schreiber, Jr.	1		-					<u> </u>		
Director	<del>-</del>	х						0.	0.	0.
Jeffrey W. Shaw	1									
Director	<del> </del>	Х			Ì			o.	0.	0.
Suzanne Sitherwood	1				$\neg$			<u> </u>		
Director	1 <u>-</u>	х						0.	0.	0.
Robert C. Skaggs, Jr.	1									
Director	1	Х						0.	0.	0.
Thomas E. Skains	1									
Director	0	x						0.	0.	0.
David F. Smith	1									
Director	0	Х		ı				0.	0.	0.
John W. Sommerhalder, II	1									
Director	7	x						0.	0.	0.
James P. Torgerson	1									
Director	0	Х						0.	0.	0.
Craig E. White	1_1_									
Director	0	Х			_ ]		Ĺ	0.	0.	0.
John B. Williamson, III	1_1_				$\Box$					
Director	0	X			_			0.	0.	0.
Dave McCurdy	50									
President & CEO	7 0	r !	i 1	Х	- 1		۱ '	1,468,299.	0.	366, 896.

Form 990 Cont 2013

### Form 990

### **Continuation Sheet for Form 990**

OMB No 1545-0047

2013

Department of the Treasury Internal Revenue Service

Name of the Organization

American Gas Association

Employler Identification number

13-0431590

Continuation: Officers, D Highest Compensated Er	irectors nployee	, Tru s	ste 			y En	ıpic			
(A)	(B)	(C)						(D)	(E)	(F)
Name and Title	Average hours per week (list any hours for related organizations below dotted line)	Individual truster or director	institutional trustee	Officer		Highest compensated employee		Reportable compensation from the organization (W 2/1099-MISC)	Reportable compensation from related organizations (W-2/1099-MISC)	Estimated amount of other compensation from the organization and related organizations
Kevin B. Belford	50			_			_			
Sr. VP & GC	1-55-			Х				423,671.	0.	182,004
Kevin M. Hardardt	50							120,0721		
CF&AO	10-			Х				363,860.	0.	76,096
Gary W. Gardner	50		$\vdash$					0007000		
VP & Secretary	1-30-	†		Х				265,920.	0.	<u>76,269</u>
Lori S. Traweek	50		П	<del></del>			T	233,320.		
Sr. VP & COO	1-0-	<b>†</b>			Х			533,566.	0.	51,184
Paula Gant	50									
Sr. VP - Policy & Planning	0	<u> </u>			Х		1	332,994.	0.	43,128
Christina Sames	50									
VP - Operations & Engineer	0	i l			Х			296,145.	0.	58,287
Jason K. Rogers	50									
VP -Govt Relations	1	i i				Х		263,005.	0.	62,246
Kathryn Clay	50									
VP - Pol. Strategy	0	Ì				Х		242,694.	0.	11,500
George Lowe	50									
VP-Federal Affairs	0	Ī				Х		255,704.	0.	7,650
Chris B. McGill	50									
VP - Pol. Analysis	0					X	<u>.</u>	234,062.	0.	155,542
Andrew K. Soto	_ 50									
VP - Reg. Affairs	0					X		217,687.	0.	36,472
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Continuation Sheet for Schedule I (Form 990)

2013

 Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

~ (h) Purpose of ŏ grant or assistance Scholarships Continuation Page Employer identification numbo Partill Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule I (Form 990), Part II.) 13 - 0431590(g) Description of non-cash assistance valuation (book, FMV, appraisal, other) (f) Method of (e) Amount of non-cash assistance (d) Amount of cash grant 30,000. 65,000. 30,000. 30,000 30,000 50,000 30,000 30,000 30,000 30,000 (c) IRC section if applicable 84-0509064 501 (c) (3) 16-1320337 501 (C) (3) 76-0588579 501 (C) (3) 42-6096518 501 (C) (3) 16-1204210|501(C)(3) 58-2106879 501 (C) (3) 23-7073977 501 (C) (3) 75-2599820|501 (C) (3) 73-1042758|501 (C) (3) 95-3813527|501 (C) (3) (P) EIN (a) Name and address of organization or government Colorado School of Mines Fndn 400 West Washington Boulevard \_ Erie\_Comm. College\_Foundation \_\_\_S150\_Sugarloaf\_Parkway\_\_\_\_\_ \_ Lamar Inst of Tech Foundation \_\_13839 West\_Bellfort\_\_\_\_\_\_ 8000 South Education Drive\_ Los Angeles Trd College Fndn. 228 East Main Street ----Monroe\_Comm. College Endn.\_\_ American Gas Association \_\_Intl\_Sch\_Hydrocarbon\_Msmt.\_\_ Marshalltown Comm Coll Fndn \_1232\_West\_Campus\_Road\_#2\_\_\_ \_ Kilgore College Foundation\_ \_\_Gwinnett\_Tech\_Foundation\_\_ \_ Ivy\_Tech\_Foundation\_ Inc.\_ 3700 South Center Street \_ Lawrenceville, GA 30043 Marshalltown, IA 50158 Los Angeles, CA 90015 Terre Haute, IN 47802 \_ 121\_Ellicott\_Street\_ Sugar Land, TX 77498 Rochester, NY 14604 \_\_855\_East\_Lavaca\_\_\_ Beaumont, TX 77705 Buffalo, NY 14204 Kilgore, TX 75662 Golden, CO 80401 \_\_1100\_Broadway\_\_ Name of the organization

Schedule I Cont (Form 990) 2013

TEEA4001L 07/12/13

Continuation Sheet for Schedule I (Form 990)

Attach to Form 990 to list additional information for Schedule I (Form 990), Part II and Part III.

2013

Schedule I Cont (Form 990) 2013 0 **(h)** Purpose of ō grant or assistance Scholarships Scholarships Scholarships Scholarships Scholarships Scholarships Scholarships Scholarships Scholarships ~ Continuation Page Employer identification number Part II | Continuation of Grants and Other Assistance to Governments and Organizations in the United States (Schedule | (Form 990), Part II.) 13-0431590 (g) Description of non-cash assistance valúation (book, FMV, appraisal, other) (f) Method of (e) Amount of non-cash assistance (d) Amount of cash grant 50,000. 30,000. 30,000. 65,000. 30,000 50,000 50,000 30,000 30,000 TEEA4001L 07/12/13 (c) IRC section if applicable 42-1178729 501 (C) (3) 22-1487354|501 (C) (3) 74-6001399|501 (C) (3) 51-0249730 501 (C) (3) 23-7069405 501 (C) (3) 23-2186644|501 (C) (3) 94-2886220 501 (C) (3) 25-1511934 501 (C) (3) 55-6017181 501 (C) (3) (B) EIN (a) Name and address of organization or government \_\_7630\_Little\_River\_Turnpike\_\_\_ WW University Foundation, Inc. \_ N.E. Iowa Comm. College Fndn. \_Salt\_Lake\_Comm.\_College\_Endn. American Gas Association \_\_NWTC\_Educational\_Foundation \_\_2740\_West\_Mason\_Street\_\_\_\_ NOVA\_Comm. College\_Endn.\_\_\_ - Wstmorelnd Com Coll Ed Fndn \_\_Stevens Institute of Tech.\_ Salt Lake City, UT 84123 \_4600\_South Redwood Road \_\_1\_Castl\_Point\_on\_Hudson\_ \_ Penn\_College Foundation\_ 1500 University Avenue \_ \_\_4800\_Calhoun\_Road\_\_\_\_ Williamsport, PA 17701 \_\_University\_of\_Houston\_ \_\_One\_College\_Avenue\_\_ Morgantown, WV 26506 Annandale, VA 22003 Green Bay, WI 54307 \_ 145\_Pavilion Lane\_ Youqwood, PA 15697 Hoboken, NJ 07030 \_\_1625\_Highwax\_150\_ Houston, TX 77204 Calmar, IA 52132 Name of the organization